**PARTY REGISTER**

|  |  |
| --- | --- |
| Party Date (please complete): | Date……../………../……… Time………….. |
| Name of Party Parents/Hosts |  |

Please list the names/ages of all child guests and list any relevant medical conditions or dietary requirements. Continue on the extra pages if necessary. Email the register in advance to [**info@wildnwacky.co.uk**](mailto:info@wildnwacky.co.uk) or bring it on the day.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | NAME | | AGE AT PARTY | MEDICAL CONDITION(S)/FOOD ALLERGIES *if applicable* | OFFICE USE | |
|  | | IN | OUT |
| 1 | | Party Star goes here! | |  |  |  |  |
| 2 | |  | |  |  |  |  |
| 3 | |  | |  |  |  |  |
| 4 | |  | |  |  |  |  |
| 5 | |  | |  |  |  |  |
| 6 | |  | |  |  |  |  |
| 7 | |  | |  |  |  |  |
| 8 | |  | |  |  |  |  |
| 9 | |  | |  |  |  |  |
| 10 | |  | |  |  |  |  |
| 11 | |  | |  |  |  |  |
| 12 | |  | |  |  |  |  |
| 13 | |  | |  |  |  |  |
| 14 | |  | |  |  |  |  |
| 15 | |  | |  |  |  |  |
| 16 | |  | |  |  |  |  |
| 17 | |  | |  |  |  |  |
| 18 | |  | |  |  |  |  |
| 19 | |  | |  |  |  |  |
| 20 | |  | |  |  |  |  |
| 21 | |  | |  |  |  |  |
| 22 | |  | |  |  |  |  |
| 23 | |  | |  |  |  |  |
| 24 | |  | |  |  |  |  |
| 25 | |  | |  |  |  |  |
| Signature of Parent / Guardian: | | | | |  | | |
| Print Name: | | | | |  | | |
| Date: | | | | |  | | |
| 26 | |  | |  |  |  |  |
| 27 | |  | |  |  |  |  |
| 28 | |  | |  |  |  |  |
| 29 | |  | |  |  |  |  |
| 30 | |  | |  |  |  |  |
| 31 | |  | |  |  |  |  |
| 32 | |  | |  |  |  |  |
| 33 | |  | |  |  |  |  |
| 34 | |  | |  |  |  |  |
| 35 | |  | |  |  |  |  |
| 36 | |  | |  |  |  |  |
| 37 | |  | |  |  |  |  |
| 38 | |  | |  |  |  |  |
| 39 | |  | |  |  |  |  |
| 40 | |  | |  |  |  |  |
| 41 | |  | |  |  |  |  |
| 42 | |  | |  |  |  |  |
| 43 | |  | |  |  |  |  |
| 44 | |  | |  |  |  |  |
| 45 | |  | |  |  |  |  |
| 46 | |  | |  |  |  |  |
| 47 | |  | |  |  |  |  |
| 48 | |  | |  |  |  |  |
| 49 | |  | |  |  |  |  |
| 50 | |  | |  |  |  |  |
| 51 | |  | |  |  |  |  |
| 52 | |  | |  |  |  |  |
| 53 | |  | |  |  |  |  |
| 54 | |  | |  |  |  |  |
| 55 | |  | |  |  |  |  |
| 56 | |  | |  |  |  |  |
| 57 | |  | |  |  |  |  |
| 58 | |  | |  |  |  |  |
| 59 | |  | |  |  |  |  |
| 60 | |  | |  |  |  |  |
| 61 | |  | |  |  |  |  |
| 62 | |  | |  |  |  |  |
| 63 | |  | |  |  |  |  |
| 64 | |  | |  |  |  |  |
| 65 | |  | |  |  |  |  |
| 66 | |  | |  |  |  |  |
| 67 | |  | |  |  |  |  |
| 68 | |  | |  |  |  |  |
| 69 | |  | |  |  |  |  |
| 70 | |  | |  |  |  |  |
| 71 | |  | |  |  |  |  |
| 72 | |  | |  |  |  |  |
| 73 | |  | |  |  |  |  |
| 74 | |  | |  |  |  |  |
| 75 | |  | |  |  |  |  |
| 76 | |  | |  |  |  |  |
| 77 | |  | |  |  |  |  |
| 78 | |  | |  |  |  |  |
| 79 | |  | |  |  |  |  |
| 80 | |  | |  |  |  |  |
| 81 | |  | |  |  |  |  |
| 82 | |  | |  |  |  |  |
| 83 | |  | |  |  |  |  |
| 84 | |  | |  |  |  |  |
| 85 | |  | |  |  |  |  |
| 86 | |  | |  |  |  |  |
| 87 | |  | |  |  |  |  |
| 88 | |  | |  |  |  |  |
| 89 | |  | |  |  |  |  |
| 90 | |  | |  |  |  |  |
| 91 | |  | |  |  |  |  |
| 92 | |  | |  |  |  |  |
| 93 | |  | |  |  |  |  |
| 94 | |  | |  |  |  |  |
| 95 | |  | |  |  |  |  |
| 96 | |  | |  |  |  |  |
| 97 | |  | |  |  |  |  |
| 98 | |  | |  |  |  |  |
| 991 | |  | |  |  |  |  |
| 100 | |  | |  |  |  |  |
| Signature of Parent / Guardian: | |  | | | | |
| Date | |  | | | | |