



Family Registration Form

Illawarra MS Family Day

Rydges Central City Wollongong,

Saturday 7 August 10am – 3pm

Illawarra Family Day

Registration Details

Name of person with MS:

Gender:

Female Male

Name of partner:

Gender:

Female Male

Children attending (must be over 5 years old):

Activities and sessions will be provided for children 5 years and over. No childcare for children under 5 years old will be provided.

Name:

Age:

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Name:

Age:

| | | |
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Name:

Age:

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Name:

Age:

| | | |
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| <input type="text"/> | <input type="text"/> | <input type="text"/> |
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Address:

Post Code:

Telephone:

Mobile:

E-mail Address:

For People with MS - please indicate if you:

walk unaided use an aid use a wheelchair use a scooter

Photo Consent

This form is to be completed in all instances where photographs, film footage, audio material, electronic images, correspondence and/or quotations are used in material using the MS Australia ACT/NSW/VIC name and/or logo. The person involved must sign the form.

I am pleased to authorise the use of photographs, correspondence or quotations for the promotion of MSL.

Yes No Person with MS: _____ Date: _____

Yes No Partner: _____ Date: _____

**Places for families are limited so please RSVP by
Thursday 15 July 2010**

Please complete and return to:

Rosanna Commisso
ACT/NSW Peer Support Coordinator - MSA
PO Box 210
Lidcombe NSW 1825

Phone: (02) 9646 0757

Fax to (02) 9643 1486

Email: rosanna.commisso@msaustralia.org.au

by Thursday 15 July 2010