

Central to Hunter Ex-Students Association
2024 REGISTRATION FORM must be completed and returned to
PO Box 308 Wallsend 2287
OR
Emailed to centraltohunter@gmail.com

The form can filled in by typing in the form (preferred) or by printing the form and hand writing (**please PRINT**) the responses.

Current Surname:

First Name:

Surname known at school:

Address:

Phone Number Home: Mobile:

Email Address:

First Year at (any) High School:

I wish to sit with my Year (mark one): Yes No:

(If **No**, with whom)

(SEATING CANNOT BE CHANGED ON THE DAY)

Special Dietary Requirements (mark one): Yes No:

Please Specify:

ARE YOU A LIFE MEMBER? (mark one) Yes No:

Payment made (Date):

Payment Method: