



ARMED FORCES INFORMATION

Name of Parent/s in the Armed Forces: _____

Which Armed Forces: Army / Navy / Air Force

Dates of Service: From: _____ To: _____

Please complete if you have left the services within the last 6 years

Please state if your child lives in the same household as the member of the

Armed Forces: Yes / No

Please state the relationship with the child:

e.g. Mother/Father/Step-mother/Step-father

Would you like your child to join the Military Kids Club? Yes / No

Dinner Arrangements: Free School Meal - Paid School Meal - Packed Lunch - Home

Signed: _____ **Date:** _____

(Person with parental responsibility)