

## Your Write to Rachel Programme Sign-Up Questionnaire

#### **INSTRUCTIONS:**

Please complete the below short Programme Questionnaire on you and your child to help us design a personalised programme for your child. The \* fields should not be skipped. Please send the completed Questionnaire to info@WritetoRachel.com.

## A. Information about the Parent(s) or other Responsible Person(s):

1. Name*:			
2. Email*:		1	
3. Phone*:			
4. Address*			
5. Other inf			
5. Other mil			

6. To whom should copies of Write to Rachel letters to your child be copied and what are their email and phone (landline and mobile) contact details:

i. Email\*: ii. Phone\*

### **B. Information about your Child:**

1. Name of Child			
2. Date of Birth*			
3. Brothers/sisters names and ages:			

4. Names of both parents/guardians/responsible persons\*:

5. Names and information about other 'important persons' for your child e.g. Grandparents, relatives, best friends, pets, etc.:

**6.** Address and places lived:

7. School(s) attended:			
8. Interests/hobbies:			
9. Likes and dislikes:			
10. Anything else that it is important for Write to Rachel to know?			

# **C.** Areas you would like Write to Rachel to develop with your child (please fill with X if applicable)

i.	Composition:
ii.	Vocabulary:
<b>iii</b> .	Spelling and Punctuation:
iv.	Other (please specify):