

# NOMINAL ROLL

**FIRE SAFETY – Please ensure this list is accurate on your arrival at the Centre**

Group Name:

Group Leader Name:

Centre / Building:

Dates of Visit:

Name and Telephone of Emergency Contact: (at school)

Name and Telephone of Emergency Contact: (out of school hours)

	Accompanying Adults	Room	Sex
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
	Student Name	Room	Sex
1			
2			
3			
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**If you require more space please add to new form**

This information is not kept after your visit re: GDPR 2018. It is requested only for the purposes of providing our services safely.

# NOMINAL ROLL

**FIRE SAFETY – Please ensure this list is accurate on your arrival at the Centre**

	Accompanying Adults	Room	Sex
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
	Student Name	Room	Sex
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	Student Name	Room	Sex
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**If you require more space please add to new form**

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