



The Big Latch On 2017 Registration Form

The most women breastfeeding simultaneously at 10.30am Friday 4th or Saturday 5th August 2017

“Successful Breastfeeding requires Support from Family, Friends & Communities”



Venue Name & Address:

Venue No.:

Host's Name:

Email Address:

All women participating in the Big Latch On 2017 as a breastfeeding woman should complete this registration form

	Your Name	Your Age	Your ethnicity/ ethnicities	Child/ren's age(s)	No. of support people with you (if any)	Photo Consent (sign if you agree) *See below	Email address
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

***Photo Consent - I authorize use of my own & my child's visual image & statements in newsletters, posters, internet & other advertising to promote breastfeeding & the Big Latch On.**



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11							
12							
13							
14							
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16							
17							
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21							
22							
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31							
32							
33							
34							
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40							

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41							
42							
43							
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46							
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50							

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