1	The Big Latch On 2023 Registration Form					
the BIG		(circle one) Friday 14 th / Saturday 15 th / Sunday 16 th April 2023			WOMEN'S	
		Ko te mana o te whāngai	Ko te mana o te whāngai ū, ko tā te whānau whānui		HEALTH ACTION	
Ma		"Supporting breastfeeding helps w	vhānau and communities to flou	urish"		
Venue name & address:			Venue number:			
Host name:			Host email:			
All parents participating in the Big Latch On 2023 must complete this registration form						
	Name Please PRINT	Email	Participants Total number of people attending the	Photo consent (sign if you <u>agree</u>) *See below	Please tick if Big Latch On & its	
	(Everyone attending and volunteering to sign in)		event with you (including children and supporters)		partners can stay in touch?	
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*Photo consent – I authorise use of my own and my child/children's visual image and statements in newsletters, posters, internet and other advertising to promote breastfeeding and the Big Latch On.						
Witness/Host statement: Please upload the total number of participants at your location through host website Total number of participants at this location: and scan & email this form to the BLO Organisers at events@wha.org.nz						
Name (print):						