

Ffurflen Gofrestru Registration Form

CEDWIR YR HOLL WYBODAETH A GYFLWYNIR ISOD YN GYFRINACHOL
ALL INFORMATION PROVIDED BELOW IS TREATED AS CONFIDENTIAL



Gwasanaeth
Cerdd Ysgolion
Gwynedd a Môn

GWYBODAETH GYFFREDINOL GENERAL INFORMATION

Enw disgybl Pupil name	
Ysgol a blwyddyn School and year	
Dyddiad geni Date of birth	
Cyfeiriad a chod post Address and postcode	
Rhif ffôn cartref Home phone number	
Rhif symudol rhiant/ gwarcheidwad Parent/ guardian mobile number	
Rhif ffôn symudol y disgybl os yn briodol Student's mobile number if applicable	
E-bost rhiant/ gwarcheidwad Parent/ guardian e-mail address	

GWYBODAETH FEDDYGOL MEDICAL INFORMATION

Enw a chyfeiriad meddyg Doctor's name and address	
Rhif ffôn y feddygfa Surgery telephone number	
Nodwch unrhyw gyflwr meddygol, ymddygiad neu emosïynol gan gynnwys manylion unrhyw driniaeth neu feddyginiaeth berthnasol. Please note any medical, behavioural or emotional conditions and any relevant medication or treatment.	
Rhoddaf ganiatâd i'm plentyn dderbyn triniaeth feddygol frys. I give permission for my child to receive emergency medical treatment.	Llofnod/ Signed: <input type="checkbox"/> Rhiant/ Parent <input type="checkbox"/> Gwarcheidwad/ Guardian Dyddiad/ Date: / /

MANYLION CERDDOROL MUSICAL DETAILS

Offeryn cyntaf First Instrument	
Safon chwarae: e.e. dechreuwr/ gweithio ar gradd 3 Standard: e.g. beginner/ working on grade 3	

Rhoddaf ganiatâd i fy mhlentyn fod mewn llun/ ffilm i hyrwyddo'r Gwasanaeth neu ymddangos ar y wefan/ Facebook.
I give permission for my child to be photographed/ filmed to promote the Service or to appear on the website/ Facebook.

Llofnod/ Signed:

Dyddiad/ Date: / /