

Name: Mabel Canary

Date: 2014-10-13

Male Female

Which project would you like to enrol on? (Tick one box.)

- | | |
|---|--|
| <input type="checkbox"/> Mind-Controlling Cookies | <input checked="" type="checkbox"/> Telepathic Cakes |
| <input type="checkbox"/> Exploding Chocolates | <input type="checkbox"/> Ray Gun |

Which ice-cream flavours do you like? (Tick all that apply.)

- | | | |
|---|----------------------------------|--|
| <input checked="" type="checkbox"/> Vanilla | <input type="checkbox"/> Mint | <input type="checkbox"/> Toffee |
| <input checked="" type="checkbox"/> Fudge | <input type="checkbox"/> Guaraná | <input type="checkbox"/> Strawberry |
| <input type="checkbox"/> Raspberry Ripple | <input type="checkbox"/> Chilli | <input checked="" type="checkbox"/> Other: <u>Neapolitan</u> |