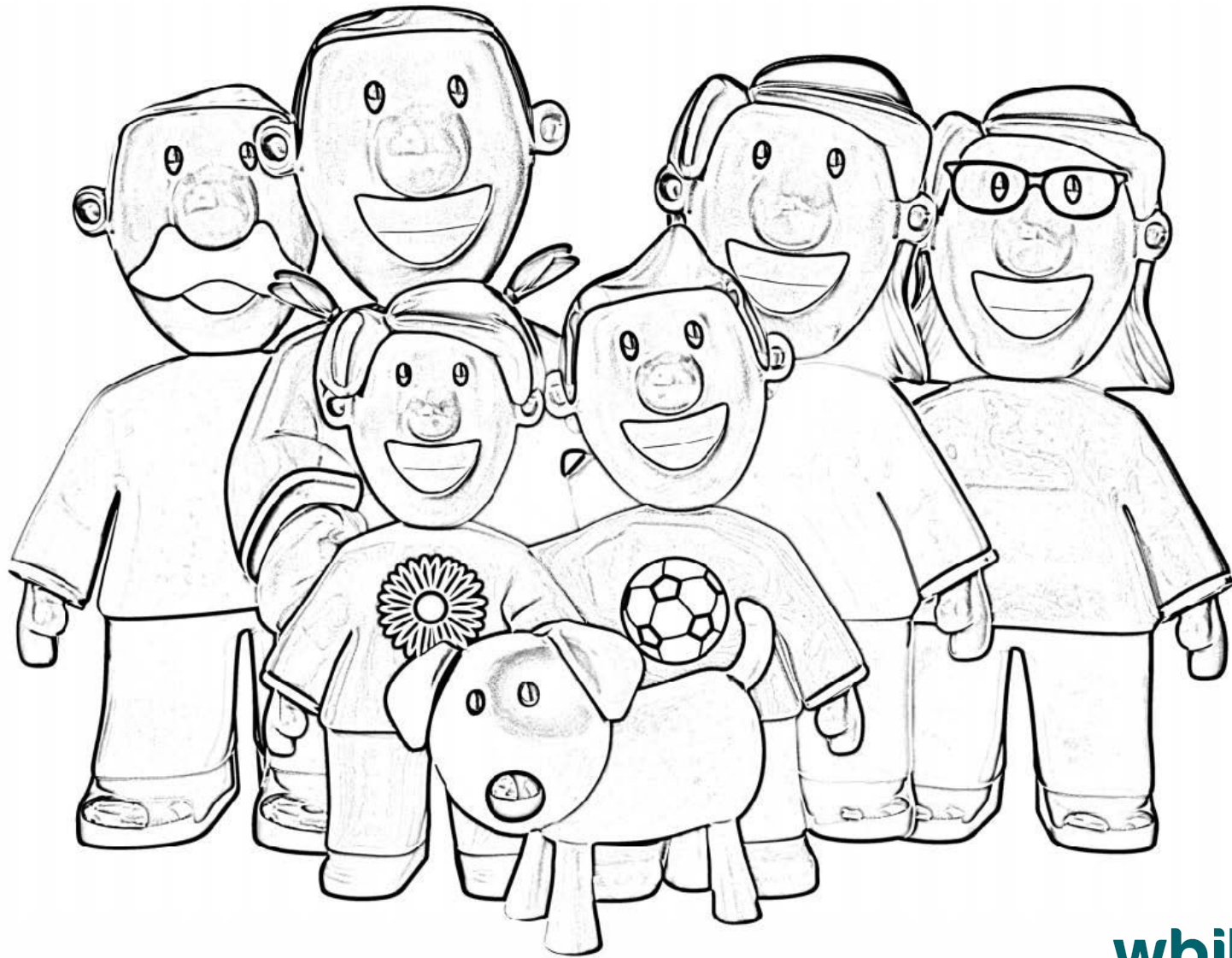


Children's Colouring Competition



Name:

Age:

whitworth
your family pharmacy

Child's name:

Parent's name:

Contact email:

Contact phone number:

Postcode:
