



Explorers Holiday Bible Club Registration Form

Explorers ~ Monday 17th August – Friday 21st August 2015

Holy Trinity Parish Halls, Banbridge from 10:30pm to 12:30pm each day.

Name of child

Address.....

.....

Age Date of birth

School School Class

Parent(s)/Guardian(s)name(s).....

Email Address of Parent/Guardian

Telephone Number of Parent/Guardian

Emergency Contact 1

Name

Relationship to child.....

Preferred Contact Number.....

Alternative Contact Number (if cannot be reached on preferred contact number)

Emergency Contact 2

Name

Relationship to child.....

Preferred Contact Number.....

Alternative Contact Number (if cannot be reached on preferred contact number)

In order to help with planning if you could please return the completed form to Pete or the Parish office asap before Wednesday 12th August 2015 to help us in our planning and preparations. Thank you.



I give permission for [child's name]to attend the 'Explorers Holiday Bible Club' meeting on the days and times specified above and to participate in all the activities of the organisation, and know of no medical reason why he/she should not do so. It is my understanding that my specific consent will be sought for any additional activity outside the above days and times and venue.

I give permission to allow photographs or videos to be taken of my child in the context of the organisation activities for the sole use in the parish magazine, church publicity and/or the church website.

Yes No

Does your child have any **medical condition/allergies** (specifying any medication he/she may be taking) and/or has any **special dietary requirements** about which the leaders of the Holiday Bible Club should be informed?

I give permission to be contacted about other youth and parish events by email -

Email – YES NO (Please tick as appropriate)

I give permission for the basic first-aid to be administered to [child's name]

Yes No

In the event of he/she being taken ill during Holiday Bible Club in which surgical operation or serum injection becomes necessary, I hereby authorise the leader in charge to sign on behalf any written consent forms required, provided the delay necessitated to obtain my signature might endanger his/her health or safety.

Yes No

Parent/guardian's signature Date

Consent must be provided by the person with parental responsibility.

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