

Child Registration Form

One form to be completed per child

Full name: _____ Name by which child is known: _____

Date of Birth: _____ School: _____

Name of Persons with parental responsibility: _____

Relationship to child: _____

Address: _____

Postcode: _____

Telephone number: _____ Mobile Number: _____

Alternative contacts:

Name: _____ Relationship: _____ Telephone: _____

Name: _____ Relationship: _____ Telephone: _____

Name of anyone else who may collect your child: _____

Password used for others to collect your child: _____

Additional information:

Allergies/dislikes / Dietary restrictions: _____

Medical conditions or additional needs: _____

Doctor's name: _____

Language spoken at home: _____

Any other information (*feel free to use back of page for additional space*):

WALK HOME ALONE: *Unless permission is given your child must be picked up*

I /we consent to my child being allowed to walk home: Yes / No

I have read, understand and agree to the terms and conditions. I have disclosed any medical information which will be needed by Park Baptist Church. I give my consent for photographs and video materials of my children to be used. I give my consent for the administration of basic first aid treatment by qualified first aid staff and give my consent for my child to be taken to hospital in case of an emergency, providing I am immediately advised of this action. I give permission for my child to take part in local supervised off-site activities during the clubs hours. (Additional permission will be needed for of any trip which changes pick up / drop of time or is further then 2 miles away).

Any child leaving the club alone must have an adult complete the Home Alone section. Unless requested by letter, children should not bring valuables or any extra money. Park Baptist Church take no responsibility for lost or stolen valuables.

Continuous, disruptive and unacceptable behaviour by any child will result in their removal from the activities. Children should be appropriately clothed for participation in all activities. In good weather we may take the children outside. Sun cream, sunglasses and hats must be provided by parent/guardians.

If a child needs medication they will administer it themselves and make the holiday club staff aware that they have done so. If help is needed this should be arranged by parent/guardians in advance by speaking to Park Baptist Church.

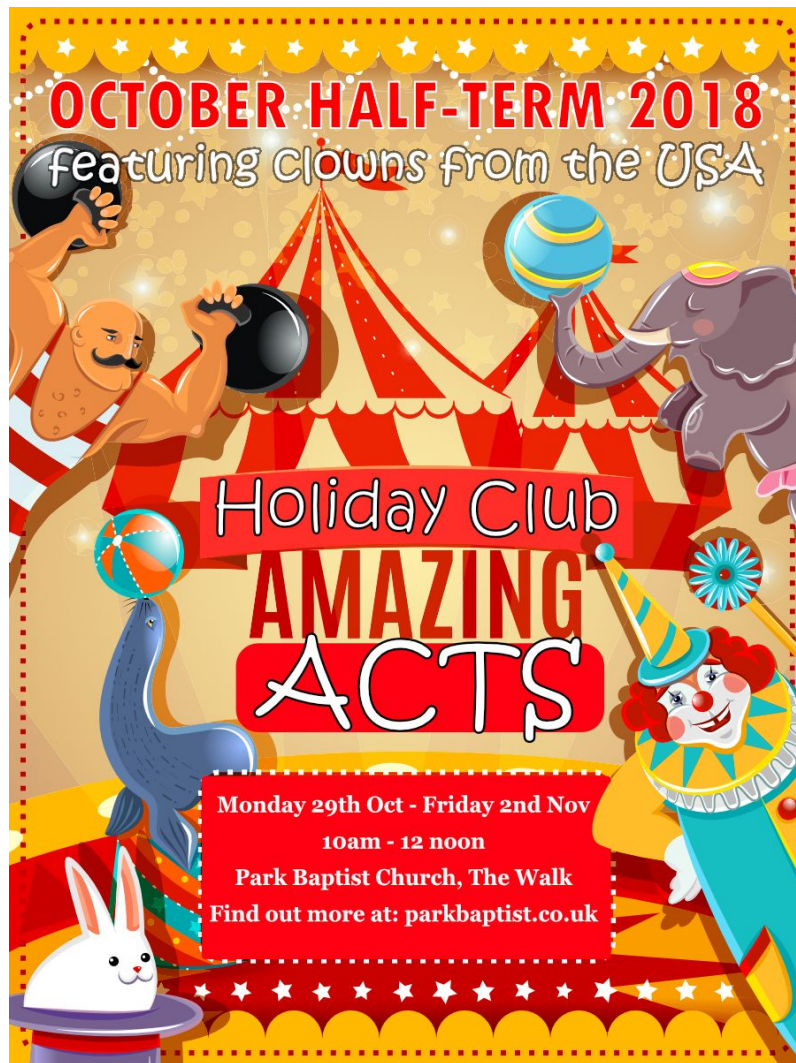
Information will be kept for 24 months and then securely destroyed.

Signature: _____

Date: ____/____/____

HOLIDAY CLUB - “Amazing Acts”

With DEANO and Friends FROM The USA



Monday 29th October – Friday 2nd November 2018
10 am – 12 noon at Park Baptist Church

Dear Parent / Guardian,

We are excited to announce that we will once again have a team coming all the way from the USA to run a special children's holiday club.

Each day there will be games, crafts, quizzes and circus skills, as well as important talks and sketches featuring clowns.

The holiday club is free of charge, but registration is essential as we are limited to spaces within each age group. If you would like your child to attend, please return the registration form on the opposite side of this page as soon as possible to reserve your child's place.

You may return the form to Park Baptist Church, The Walk, Merthyr Tydfil or Gurnos Christian Centre 26 Spruce Tree Grove, Gurnos, Merthyr Tydfil, CF47 9AU.

If you have any questions feel free to contact us on: 01685 350503 or email gurnoscc@gmail.com

Thank you.