

Child Registration Form

One form to be completed per child

Meeting: _____

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 collected*

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 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: ____/____/____