

GENERAL INFORMATION AND CONSENT

Belmont Hall Holiday Bible Club 2019

Child's name 1. _____ Date of Birth ____/____/____
2. _____ Date of Birth ____/____/____
3. _____ Date of Birth ____/____/____
4. _____ Date of Birth ____/____/____

Address _____

Name of parent _____

Telephone number Day: _____ Other/Mobile: _____

Name of additional contact (grandparent etc or other holding parental responsibility)

_____ Telephone number _____

Details of any regular medication, medical problem (e.g. asthma, epilepsy, diabetes, allergies, dietary needs, etc.) or disability which may affect normal activity: (use additional sheet if necessary)

Name _____ Medical details _____

Please state date of last anti-tetanus injection if known ____/____/____

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Please state date of last anti-tetanus injection if known ____/____/____

- *I give permission for the above child/children to take part in the normal activities of this Holiday Bible Club.*
 - *I understand this will involve one supervised sports activity session in Harrow Recreation ground in addition to the Hall based activities*
 - *I understand that while involved he/she/they will be under the control and care of the group leader and/or other adults approved by the church leadership and that, while the staff in charge of the group will take all reasonable care of the children, they cannot necessarily be held responsible for any loss, damage or injury suffered by my child/children during, or as a result of, the club.*
1. *In an emergency and/or if I am not contactable, I am willing for my child/children to receive necessary hospital or dental treatment including an anaesthetic* • YES • NO (Please tick)
 2. *I am happy for photographs of my child(ren) to be used on Belmont Hall's facebook page, twitter feed or website (without names attached)* • YES • NO (Please tick)
 3. *I am happy for my details above to be included on a mailing list to be contacted about activities at Belmont Hall in the future.* • YES • NO (Please tick)

Signed (parent/or adult with parental responsibility) _____ Date _____

NB The information part can be completed by a carer. Only those with parental responsibility can sign the consent.

This data is held securely in accordance with our Privacy notice which is available on our website.