

Registration and consent form: children

Church groups (including bell-ringing), day visits, camps and residential holidays[†]

Name of church:	Name of group/activity:
Family contact details:	
Child's full name:	Date of birth:
Full name of parent/guardian:	
Child's home address:	
	Home telephone:
Parent's/guardian's mobile number:	
School:	School year:
About your child:	
Does your child have any food allergies (please	specify)?
Does your child have any medical conditions (p	lease specify)?
Is your child on any medication (please specify)	?
NHS number: Details of last ant	i-tetanus injection:
Does your child have any special needs (please	specify)?
Is there anything else you would like us to know	w about your child?



Emergency contact details for parents/guardians:

Contact telephone number during group or activ	rity time:
Contact name for an alternative adult in case of	emergencies:
Alternative adult's telephone number:	
Alternative adult's relationship to your child:	

Arrangements for collection:

My child will be brought and collected from the group:		YES/NO*
My child will be collected by:	Relationship to child:	
Name of anyone NOT allowed to collect my child:	Relationship to child:	
My child has permission to travel to and from the group without me (children over 11 years):		YES/NO*

Declaration:

I give permission for (child) to attend and take part in the specified activities.

In an emergency and/or if I am not contactable, I am/am not (delete as appropriate) willing for my child to receive medical or dental treatment including an anaesthetic.

Signed (parent/guardian):

Date:

Your privacy is important to us and we are committed to keeping your personal information confidential and secure. For more information on how we process your data, please see our privacy notice which is available on our website and church noticeboard.

[†]To be completed as appropriate by the adult, or parent/carer of the child. This form should be updated annually. *Delete as appropriate.