

ST JOHN THE BAPTIST 2018 HOLIDAY CLUB

at Colerne CE Primary School

Tuesday 28 August – Saturday 1 September

10am – 12noon



REGISTRATION FORM

(Please complete a separate form for each child attending)

Child's Full Name			
Child's Date of Birth		Age at start of Club <i>Must be 4yrs or a school starter on 1 Sept 2018</i>	
Address			
Pre-School / School			
Boy / Girl*			

Which mornings will your child attend?	Tuesday 28 August Yes/No	Wednesday 29 August Yes/No	Thursday 30 August Yes/No	Friday 31 September Yes/No	Saturday 1 September Yes/No

Parent / Guardian's Name	
Parent / Guardian's Tel Number	
Parent / Guardian's e-mail Address	
I am happy to be added to Colerne Church's e-mail news service	Yes/No

Emergency Contact Name	
Emergency Contact Telephone Number	
GP's Name	
GP's Telephone Number	

*Please delete as appropriate

PLEASE TURN OVER

Any known allergies, medical conditions or emergency medications that it would be helpful for us to know about.	
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Any continence issues – eg does your child still need to wear nappies or pull-ups during the day?	
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Please tell us about any special needs your child may have which will mean that they need additional support at Holiday Club. This does not necessarily mean that they will not be able to attend but we will need to make sure that we have enough helpers to support them.	
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I give permission for my child’s and my details to be stored electronically for the Holiday Club records	Yes/No
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I give permission for my child’s photograph to be taken during the club. <small>(The photographs will be used for church purposes only)</small>	Yes/No
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- I give permission for the above child to attend the Holiday Club at Colerne CE Primary School
- The above details are complete and correct to the best of my knowledge.
- In the unlikely event of illness or accident, I give permission for any appropriate First Aid to be given by a first-aider. In an emergency, and if I cannot be contacted, I am willing for my child to be given hospital treatment, including anaesthetic if necessary. I understand that every effort will be made to contact me as soon as possible.

Signature of Parent / Guardian

Date

Please return the completed form by e-mail it to colerneholidayclub@lidbrookgroup.org.uk

For any queries, please either send an e-mail to colerneholidayclub@lidbrookgroup.org.uk

or phone the Vicarage Monday, Tuesday & Thursday mornings, 9am – 12noon: Tel 01225 744458

Your privacy is important to us and we want to communicate with you in a way which has your consent and is in line with the UK law on data protection. By signing this form you are agreeing to St John the Baptist holding and processing your and your child's data for the purpose of enrolling your child in Colerne Holiday Club and to contact you with our newsletter if you have consented above.