



Registration Record for Children's Activities

To be completed annually for all children and young people attending a church-related group or activity (one-off and regular).

Church group Please tick all groups which apply to your child

TODDLERS PRAISE	<input type="checkbox"/>	ALPHA CRECHE	<input type="checkbox"/>
ST JOHN'S SUNDAY SCHOOL	<input type="checkbox"/>		<input type="checkbox"/>
ST MARY'S SUNDAY SCHOOL	<input type="checkbox"/>		
Please circle	Creche	Little Stars	Twinklers
	6m – 2 ½	2 ½ +	Reception
			Sparks
			Yr 1- 2
			Flames
			Yr 3 – 6
JUNIOR SERVERS	<input type="checkbox"/>	CLUB ROCK (Yr 3 – 6)	<input type="checkbox"/>
SOLID GROUND (Yr 7 & Yr 8)	<input type="checkbox"/>	ROCK SOLID (Yr 7 – 11)/Cell Group	<input type="checkbox"/>
CONFIRMATION CLASS (Yr 7 – 11)	<input type="checkbox"/>	YOUTH FELLOWSHIP (age 12 – 18)	<input type="checkbox"/>

Some of the following activities will apply: **TEACHING, STORIES, CRAFT, GAMES / FREE PLAY, SINGING, GOING OUTSIDE, DRINK/FOOD, MOVING BETWEEN BUILDINGS, any off-site activity will use a separate consent form**

Family Contact Details

Child's Full Name.....Date of Birth.....

Name of parents/guardian: Mobile number

Name of parents/guardian: Mobile number

Home Address:.....

Post code:..... Home Tel.

Home email:

School School year Group

About your Child

Whilst your child is in our care it would be helpful for us to know whether he/she suffers from any allergies, is on any medication or whether there is anything else you would consider important for us to know, e.g. does your child have any special needs? If they have any phobias?

- Does your child have any food allergies? (Please specify)
 - Does your child have any medical conditions? (Please specify).....
 - Is s/he on medication? (Please specify)
 - Does s/he have any special needs? (Please specify)
 - Is there anything else you would like us to know about your child?
 - Family doctor's name, address and telephone number
-

P.T.O

Emergency Contact details for parents/guardians

Contact name for an alternative adult in case of emergencies:

Contact telephone number during group or activity time:

Relationship to Child:

Arrangements for Collection (please delete as appropriate)

My child will be brought and collected from the group Yes/No (Please delete as applicable)

S/he will be collected by Relationship to child

Name of anyone NOT allowed to collect my child (if applicable)

For children aged over 11 years

My child has my permission to travel to and from the group unaccompanied Yes/No

Parent or Guardian's consent

I agree to my child attending the above group and taking part in the specified activities.

By signing this form you are confirming that you have read our Data Protection Notice (available on the website) and that you are consenting to the PCC of St Mary and St John, Walton-on-Thames holding and processing your personal data for the purpose of bringing your child to participate in a church group. YES NO

If you would like to be informed of future events and other church news please tick the box below.
 If you tick the box, we will add you to our mailing list. You can unsubscribe at any time, either by clicking on the unsubscribe link at the bottom of our emails, or by contacting the Parish Office - office@waltonparish.org.uk

Where you do not grant consent we will not be able to use your personal data; (so for example we may not be able to let you know about forthcoming services and events or claim gift aid on any donations you make); except in certain limited situations, such as where required to do so by law or to protect members of the public from serious harm.

From time to time we take photographs for use in Parish publicity this might include use on the website, social media, noticeboards and general Parish publicity. Please indicate if you give your permission for any pictures of your child to be used. YES NO

Declaration

I give permission for my child to attend the above group and take part in the specified activities.

Signed (Parent/Guardian) Date

Sent to Amy/Mandy for database Entered into database Filed in register

Copy sent to other leaders: Amy Carol Caroline Chris Rachel

Robyn Club Rock Solid Ground YF