

The Beacon Church



Mitchell Road, Canford Heath, Poole, BH17 8UE
Telephone : 01202 687697 Website : www.churc.co.uk
Canford Heath United Reformed Church Charity. Registration Number 1134115

General Declaration by parent/guardian

Group/s: (i.e. Duracell/Conundrums/)

Full name of child:

Address:

.....

Date of Birth:/...../.....

Emergency Information

Contact numbers in case of emergency

1. Name: Tel:

2. Name: Tel:

Does your child have a medical condition, disability or allergy that you wish to bring to our attention?

Yes No

If yes, please provide full details of the medical condition, disability or allergy (e.g. asthma):

.....

Please advise details of any medication which your child takes on a regular basis:

.....

Is there any other important information about your child which would help us as leaders?.....

.....

.....

(This information will not preclude a young person from participating in any activities unless it would endanger them.)

We will occasionally take the Young People out of the building to take advantage of nice weather as and when we can. Due to not being able to predict this, individual advance notice can be tricky. Therefore please indicate below if you give your consent to the Youth team taking your child out of The Beacon Church buildings, making sure they have taken all necessary precautions before leaving.

I give my consent for my child's to be taken out of The Beacon Church buildings:

Yes No

A light for Jesus in His Community

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Please indicate below that you have read the rules of Duracell (on the attached piece of paper) and that you agree to your young person to stick to them.

I have read, and agree to the House Rules for Ignite

Yes No

Consent – Please read

I understand that whilst every reasonable care will be taken, the organisation/church cannot be held responsible for any loss or damage to property or for any personal injury that may be sustained whilst, or as a result of, taking part in the activities on church premises or 'off church premises'. My attention has been drawn to the desirability of arranging insurance in respect of personal accident cover. In addition I give my authority to the leaders of the activities to sign for, and administer any emergency medical treatment that may be required if I should be unable to be contacted.

I give permission for personal information to be held on computer for such purposes as are necessary for the proper running of 'conundrums'. As a church/organisation we undertake to meet the requirements of the Data Protection Act 1998. Additionally, I consent to a leader contacting my child by email for purposes relating to youth work only.

During some sessions general photographs/videos may be taken of the activities for youth work records or displays and/or for publicity reasons or publications produces by the Borough of Poole.

I give my consent for my child's photographs/recordings to be taken for such reasons as above:

Yes No

Signed (Parent/legal guardian):

Print name: Date:/...../.....