

KILLYMURRIS PRESBYTERIAN CHURCH



The Adventure Cruise
Holiday Bible Club

REGISTRATION FORM

School Year Group (please circle)						
P1	P2	P3	P4	P5	P6	P7

Child's Full Name:		Date of Birth:	
Address:		Church attended: (if any)	

Details of any known medical conditions, allergies or dietary requirements relevant to your child and any medication being taken:

Doctor's Name:

Practice:

Telephone No:

Any other relevant special needs, requirements or directions that would be helpful for leaders to know:

KILLYMURRIS PRESBYTERIAN CHURCH

EMERGENCY CONTACT 1

Name: _____

Relationship to child: _____

Contact No: _____

(must be available during hours of HBC)

EMERGENCY CONTACT 2

Name: _____

Relationship to child: _____

Contact No: _____

(must be available during hours of HBC)

PHOTOS/VIDEO

Do you give permission for photographs / video to be taken of your child and used for church purposes? eg Powerpoint display in church service, posted on church website or Facebook page

Yes [☐] No [☐] please tick as appropriate

FIRST AID

In the event of illness or accident, I give permission for first aid to be administered where considered necessary by a first aider, if available, or medical treatment to be administered by a suitably qualified medical practitioner. In the event of a medical emergency, leaders will endeavour to contact me as soon as possible using the contact telephone numbers given.

Yes [☐] No [☐] please tick as appropriate

SIGNATURE

I, the undersigned parent/guardian, do hereby grant permission for my son / daughter, named on this form to attend the Holiday bible Club at Killymurriss Presbyterian Church.

Signature of Parent / Guardian: _____

Date: _____