

High Seas Adventure Holiday Bible Club Registration Form

Venue: 2nd Saintfield Presbyterian Church Hall

Dates: Wednesday 2nd – Friday 4th August 2017

Time: 10am – 12.30pm for current P1 – P7 pupils

Child's Full Name

Gender

Male/Female

Date of Birth

Age

School & class
(in June 2017)

Parent/Guardian's Name

Parent/Guardian's Address

Parent/Guardian's Telephone number

Home no: _____ Mobile no: _____

Alternative Emergency Contact Name: _____

Emergency Contact Number: _____

Relationship to Child: _____

Doctor's Name

Doctor's Telephone number

Detail any medical conditions or allergies:

Please register my child for **High Seas Adventure** Holiday Bible Club. I give permission for my child to participate in all activities.

Parent/Guardian's Signature _____

I give permission for my child's photograph to be taken during the Holiday Bible Club. **Yes / No**

In the event of an accident or illness I give permission for any appropriate first aid to be given by the nominated first-aider. In an emergency, and if I cannot be contacted, I am willing for my child to be given hospital treatment, including anaesthetic. **Yes / No**

Can you join us for our **Family Fun Night** on Friday 4th August?
For catering purposes tell us how many: Adults _____ Children _____

*Return to: Pamela Reid, 27 Forge Hill Court, Saintfield, BT24 7LW.
Phone for further information: 077 6927 5442*