

## Desert Detectives Holiday Club Registration form

Child's/Children's full name(s)	
Date(s) of birth	
School(s)	
Any known allergies or conditions	
Address	
Telephone number(s)	
Email	
Emergency contact name	
Emergency contact telephone number	

GP's name	
GP's phone number	
<p>I give permission for St Andrew's and Christ Church to email me about future events for children and families.</p> <p>YES / NO</p>	
<p>I give permission for my child(ren)'s photograph to be taken during the club (the photographs will be used to create a display in church or on the website for a short period after this event.)</p> <p>YES / NO</p>	
<p>Number of (a) adults and (b) children wishing to join the lunch after the holiday Club service on Friday 3<sup>rd</sup> August1</p>	
Adults:	Children:
<p>We try to keep school year groups together but it is not always possible. If there is a friend your child would like to be with please tell us</p>	
<p>In the unlikely event of illness or accident I give permission for any appropriate first aid treatment to be given.</p> <p>In an emergency, and if I cannot be contacted, I give consent for my child(ren) to receive treatment by a GP and/or hospital, including treatment under general anaesthetic. I understand that every effort will be made to contact me as soon as possible.</p> <p>I confirm that the above details are correct to the best of my knowledge.</p>	
Parent's/guardian's full name	
Parent's/guardian's signature	
Date	
Payment method	