



Saint Saviour's Church & Salvation Army Meadows  
**REGISTRATION & CONSENT FORM**  
 For Infants, Children & Youth  
 at Church, Trips, Church Halls and other Venues



Child's name:		Gender:
		Date of Birth:
Parent/guardian name(s):	Parent/Guardian 1:	Parent/Guardian 2:
Relationship to child (e.g. mother)		
Address:		If different:
Contact details:	Home:	Home:
	Mobile:	Mobile:
	Email:	Email:
Alternative emergency contact	Name:	Number:
Details of any regular medication, medical problem (e.g. asthma, epilepsy, diabetes, allergies, dietary needs etc), emotional / behavioural needs or disability which may affect normal activity:		
Doctor details:	Name:	Address:
	Tel No:	
Who else can collect your child (if applicable):		

**CONSENT & PERMISSIONS** Please circle where applicable before signing below:

- My child is allowed to leave activities / sessions without adult supervision: **YES / NO**
- I confirm that the above named child is able to take part in moderate to strenuous physical activity: **YES/NO**
- I agree that photos / videos of my child participating in any activity may be used in posters, videos, publications or websites: **YES / NO**

**PLEASE NOTE:** Your child should arrive ready to partake in the activity on time. If your child fails to comply with the rules of the activity or its supervisors, this may result in your child being sent home at your expense. Please ensure your child is appropriately dressed for the activity. This includes appropriate footwear, sports equipment e.g. trainers, and with waterproof clothing if necessary. Please send your child with any necessary medication with your permission and instructions to administer it.

**Epi-Pens:** Staff and volunteers are not qualified to administer Epi-pens. However they are permitted to do so if we receive permission from you to do so.

**Your Permission:** I hereby give permission for SS/SA representative to administer plasters, medication, an Epi-pen, or to authorise the giving of emergency medical treatment on my behalf if deemed appropriate.

I consent to all the above:

Signed: ..... Parent / Guardian      Date: .....