



Ardess Parish Church Children's Church Membership Registration Form

ARDESS PARISH CHURCH IS REGISTERED WITH
THE CHARITY COMMISSION FOR NORTHERN IRELAND NIC105485

Organisation	Date / Time	Where
Children's Church	Sundays 10.55am - 11.45am (this time may change due to changes in Covid regulations)	@ Ardess Parish Centre

CHILD'S DETAILS					
FULL NAME:					
KNOWN AS:					
ADDRESS: (incl postcode)					
Age:		DOB:		Year in School:	
	Minimum age 4				Must be in Nursery or P1 - P7

EMERGENCY CONTACT DETAILS			
CONTACT 1:		RELATIONSHIP TO CHILD:	
TEL:			
ADDRESS: (incl postcode)			
CONTACT 2:		RELATIONSHIP TO CHILD:	
TEL:			
ADDRESS: (incl postcode)			

PARENTS' DETAILS (only if not noted above)	
MOTHER'S NAME:	
TEL:	
ADDRESS (incl postcode):	
FATHER'S NAME:	
TEL:	
ADDRESS (incl postcode):	

PERMISSIONS	
By signing this form, I give permission/confirm:	
PARTICIPATION:	
_____ [<i>name of child</i>] will be a member of <i>Children's Church</i> (meeting on the day and times specified) and can participate in all the activities of the organisation, and confirm that there is no medical reason why he/she should not do so (see below). It is my understanding that my specific consent will be sought for any additional activity outside the above day and venue.	
GDPR	
that the details on this form can be accessed by the Children's Church Leaders during Children's Church.	
COVID	
that my child (and who is collecting my child) will abide by Covid Regulations in place (eg use of masks, hand sanitising etc) as advised by Children's Church Leaders.	
BASIC FIRST AID	
I give permission for basic first aid to be administered to my above-named child: YES..... NO	
MEDICAL EMERGENCY	
In the event that my above-named child is taken ill and requires a surgical operation or serum injection, I hereby advise that the leader in charge may sign any written documentation necessary if delay in receiving my own signature may endanger my child's health/safety:	
YES..... NO	
MEDICAL CONDITIONS/ALLERGIES/SPECIAL DIETARY REQUIREMENTS	
Does your child have any medical conditions/allergies/dietary requirements that Children's Church leaders need to be aware of? YES..... NO	
If so, please advise here what Children's Church Leaders need to be aware of eg medication, avoiding certain foods etc;	
* Parent/guardian's signature:	
Relationship to Child:	Date:
* Consent must be given by the person with PARENTAL RESPONSIBILITY.	

