

# Ss Philip & James Junior Church 2019-2020



Registration & Photo Consent Form

Welcoming all in our community  
into the love of Christ

Please return this form to a member of the junior church team.

Family contact details		
Child's full name:		Date of birth:
Full name of parent/guardian:		
Home address	Home telephone:	
	Mobile telephone:	
	Home e-mail:	
About your child		
Whilst your child is in our care it would be helpful for us to know whether he/she suffers from any allergies, is on any medication or whether there is anything else you would consider important for us to know. Please be as specific as you can, eg if your child normally receives 1-to-1 support at school please tell us.		
Does your child have any food allergies?	YES / NO	
Does your child have any medical conditions?	YES / NO	
Is your child on any regular medication?	YES / NO	
Does your child have any special needs?	YES / NO	
Is there anything else you would like us to know about your child?		
Family doctor's name:		Telephone:
Family doctor's address:		
Emergency contact details		
It is our expectation that the child's parent/guardian will remain in the church building during the session but it may be useful for us to have alternative contact details so please supply below.		
Contact name for an alternative adult in case of emergency:		
Relationship to child:	Telephone:	
Photo Permissions		
We sometimes take photographs which may appear in our printed publications and/or on our website. We will, however, only include images of children in our publicity with the consent of their parents or guardians and we will do not include names.		
I am happy for you to take photos of my child for use as above (please tick) <input type="checkbox"/>		
Declaration		
I would like to be emailed updates about relevant junior church activities (please tick) <input type="checkbox"/>		
I would like to be emailed updates about other family friendly activities in the church <input type="checkbox"/>		
I give permission for my child to attend the junior church sessions and take part in all the activities. I understand that the data on this form will be used for the purposes of administering the junior church only and my data will not be passed on without seeking my express consent.		
Signature:  (Parent/guardian)		Date: