

PYRAMID ROCK REGISTRATION FORM *(Please use a separate form for each child).*

PYRAMID ROCK will take place at **St James Church, Broughty Ferry**

From: Monday 8 August **to** Friday 12 August 2022 *Please fill in this form to book a place for your child.*

Child's full name		Sex: M / F
Date of birth	School	
Please register my child for PYRAMID ROCK		Parent's/Guardian's signature
Parent's/Guardian's full name		
Address		
Phone number		
I give permission for my child's and my details to be entered on the church database		Yes / No

PYRAMID ROCK CONSENT FORM *(Please use a separate form for each child).*

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Child's full name		Date of birth
Address		
Emergency Contact name		Phone number
GP's name		GP's Phone number
Any known allergies or conditions		
<p>I confirm that the above details are complete and correct to the best of my knowledge. In the unlikely event of illness or accident, I give my permission for any appropriate first aid to be given to 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 if necessary. I understand that every effort will be made to contact me as soon as possible.</p>		
Signature of parent/guardian:		Date: