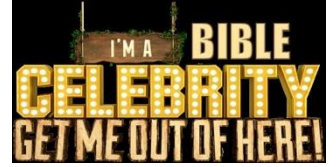


BROUGHTY FERRY PARISH CHURCH REGISTRATION FORM

(Please use a separate form for each child).

One-day Holiday Club will take place at
Barnhill St Margaret's Church, Invermark Terrace, Barnhill DD5 2QU
On: Tuesday 20th February 2024, 9am to 3pm
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 I'm a Bible Celebrity Get Me Out Of Here! | | 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 |
| I give permission for videos/photographs of my child to be taken at the Holiday Club | | Yes/No |
| Photographs /videos will be used for church purposes only including church magazines and websites | | |

BROUGHTY FERRY PARISH CHURCH CONSENT FORM.

(Please use a separate form for each child)

One-day Holiday Club will take place at
Barnhill St Margaret's Church, Invermark Terrace, Barnhill DD5 2QU

On: Tuesday 20th February 2024, 9am to 3pm *Please fill in this form to book a place for your child.*

| | | |
|---|--|-------------------|
| Child's full name | | Date of birth |
| Address | | |
| Emergency Contact name | | Phone number |
| GP's name | | GP's Phone number |
| Any known allergies/ dietary requirements or conditions | | |
| 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. | | |
| Signature of parent/guardian: | | Date: |