

Child / Children Name(s) _____

Date of Birth _____

Parent / Guardian Name _____

Address _____

Phone _____

Mobile _____

Alternative Contact _____

I give permission for photographs and video to be taken within the club

for use at the club and future events. **YES /NO**

I give permission for my child to have juice and snacks. **YES /NO**

Note any special needs/medical/allergy/dietary requirements :-

I give permission for my child / children, as listed above, to participate in the activities of the following events:

Good News Club

Holiday Bible Club

Halloween Party

Signed _____

Parent / Guardian

Please return this form directly to Helen, not via the school, thanks. You can text her to let her know that your child is coming, and then supply this form on the first day. (087 950 1443)