



CHURCH HOLIDAY CLUB – MAY 2025 CHILD REGISTRATION FORM

Please complete for each child and e-mail to stmartinsruislip@btconnect.com

Child's Details	
Child's Forename	
Child's Surname	
Child's Full Address & Postcode	
Child's Gender	
Child's Date of Birth	
Child's School Year e.g. Year 4	
Contact Details 1 - Parent/Carer	
Parent/Carer Full Name	
Relationship to Child	
Daytime Phone Number	
Mobile Phone Number	
E-mail Address	
Home Full Address & Postcode (if different from child's)	
Contact Details 2 - Parent/Carer or Other Emergency Contact	
Contact's Full Name	
Relationship to Child/Family	
Daytime Phone Number	
Mobile Phone Number	
E-mail Address	
Home Full Address & Postcode (if different from child's)	
About Your Child	
Does your child have any allergies? If so, please specify	
Does your child have any medical conditions? If so, please specify	
Does your child take any medication? If so, please specify	
Does your child have any special dietary requirements?	
Does your child have any special/additional needs or disabilities? If so, please specify	
Your child's GP surgery & address of surgery	



Is there anything else you would like us to know about your child? If so, please specify	
Names of adults allowed to pick up your child at the end of each session	

Permissions and Specific Consents

We take the safeguarding of children and young people and your privacy seriously. We will only use your personal information to serve you and to protect your child whilst they are at the holiday club. Please note that by signing this form you are confirming that you are consenting to the PCC of St. Martin's Church, Ruislip holding and processing your data for the following purposes.

***Please put an 'X' in the boxes where you grant consent.
This consent can be withdrawn at any point by contacting the church office.***

I consent to St. Martin's Church contacting me by: Post Phone Email Social Media

I give permission for my child to attend St. Martin's Church holiday club.

I give permission for mine and my child's details to be added to the holiday club register to enable the church to communicate with us and register my child.

I give permission for my child to be photographed or filmed when taking part in holiday club activities. These pictures will only be used for church publicity (including social media, online, and print). Please note this will be done in accordance with our policies.

I give permission for St. Martin's Church to keep me informed about news, events and activities relating to the holiday club.

In the event of an accident or emergency involving my child, I understand that every effort will be made to contact me immediately. Emergency services will be called as necessary and I understand my child may be taken to hospital accompanied by a team member for emergency treatment and that health professionals are responsible for any decisions on medical treatment in my absence.

I acknowledge that expensive personal possessions are my responsibility and that leaders cannot be held responsible for any loss or damage to mine or my child's property and that St. Martin's Church recommend leaving these possessions and devices at home.

Signed (parent/guardian) <i>E-signature acceptable</i>	
Name (parent/guardian)	
Date	