



The Hut

Parental Consent Form



BIG KIDS are working in partnership with St Martins and Trinity Family Friendly Centre, to run a weekly kids club for children aged 7-11.

Please tick to indicate the months your child can attend below;

Event: **Kids Club** Dates: **Monday's during term time (see program or website for dates)**

Time: **5:00 – 6:30pm** Venue: **St Martin of Tours Church, Whinney Banks, TS5 4LB**

Among the activities will be: **Games, crafts and other activities themed around Christian teachings.**

Cost: **£1 each week** Form: **Please return completed consent form on the night.**

This form is to be read & completed by a parent/guardian in the light of the above

Name of child Date of Birth

Address

Parent's home no. Parent's mobile no.

Parent's Email Address

Will the next of kin be at this address for the duration of the event? **YES/NO**

If not, please give details of where they may be contacted:

Additional emergency contact (name, tel. no., relationship)

Please tick the box to indicate that you consent to BiG KIDS retaining the contact detail information provided above. The information will only be used to contact you about other events that your child may be interested in or changes to these events. It will not be shared with any other organisations or individuals and it will be held securely for a maximum of 18 months. []

My child suffers from (illness/allergy/condition):

Please describe the condition & the treatment required (including prescription medicines, and when taken) overleaf. Please also include details of any recent inoculations as appropriate.

My child's Doctor is (name, address and telephone)

Please delete as appropriate: My child is / is not actively sensitive to Penicillin.

I have read the information provided and give my permission for my child to take part in the above event and its activities.

I understand that while attending, he/she will be under the control and care of the leaders and/or other adults approved by the charities trustees and that while staff in charge of the group will take responsible care of the children, they cannot necessarily be held responsible for any loss, damage or injury suffered by my child arising during or out of my child attending.

I understand that should my child require emergency treatment owing to illness/injury and I am not available to give my consent, the doctor or surgeon concerned can decide on appropriate treatment, if my child's health or safety is at risk.

Camera and video may be used during the event. We will adhere to child protection guidelines at all times. Pictures may be placed on the BiG KIDS website, our Facebook page (www.facebook.com/bigkidsboro) and used within publications. If you do not want your child to be photographed, please tick here:

Name of parent/guardian Date

Signature of parent/guardian BiG KIDS - Registered Charity: 1172383