



Summer Holiday Club
Monday 2nd to Friday 6th August 2021
10am -12.30pm.
VENUE:
Edmonton **Methodist** Church
300 Fore Street, Edmonton, London, N9 0PN

One form per child

CONSENT FORM

**I give permission for my child to go to GO MAD! Summer Holiday Club
Monday 2nd to Friday 6th August 2021 – 10:00am to 12:30pm**

Child's Full Name:

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Boy	<input type="checkbox"/>	Girl	<input type="checkbox"/>
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Date of Birth: **Age at Holiday Club**

School:

School Year:

Home Address:

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Postcode	<input type="text"/>	<input type="text"/>
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Parent/Guardian Name & Number:

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Emergency Contact Number *(other than parent/guardian):*

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Name and telephone number of GP:

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Details of any known conditions, allergies, etc:

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In the unlikely event of illness or accident, I give permission for any necessary medical treatment to be administered by the nominated first-aider or by suitably qualified medical practitioners. Should my child require emergency hospital treatment, I authorise an adult leader to sign on my behalf any written form of consent required by the hospital if I cannot be contacted. I understand that every effort will be made to contact me as soon as possible.

I understand that neither Christian Aid nor the publisher of the course material can be held responsible for any accident or illness that takes place as a result of the activities suggested.

I confirm that the above details are correct to the best of my knowledge.

I do/do not give permission for my child to have their photograph taken or be videoed during the club. (*Delete as appropriate. Please note that we will take group shots only, for the purpose of showing at our Grand Finale.)*

Signature (parent/guardian):

Please Print Full Name:

Date:

My child will normally be collected by the following adult(s) at the end of the club.

Name:OR.....

Please send completed form to: enfielddyouthwork@yahoo.com