

Holiday Bible Club Consent Form



Please list the name and age of the child(ren) who will be attending, and any medical requirements or allergies our leaders should be aware of.

Child's Name	Age	Medical Requirements

Do you give permission for photographs/video to be taken of your child(ren) and used for church purposes? e.g. PowerPoint display in church service.

Please circle as appropriate: Yes / No

In the event of illness or accident, having parental responsibility for the above named child(ren), I give permission for first aid to be administered where considered necessary by a first aider, if available, or medical treatment to be administered by a suitably qualified medical practitioner. In the event of a medical emergency, leaders will endeavour to contact you as soon as possible using the contact telephone numbers given.

Parent/Guardian's Name: _____ **Signed:** _____

Address: _____

Home Telephone: _____ **Mobile:** _____

Please note: The consent form above does not cover the Family Fun Night, all children who attend on Thursday 25th August must be accompanied by a responsible adult.



More Information

For more details about the activities mentioned overleaf, directions to Brookside, and our parking arrangements visit: www.brooksidepc.org/summer2022