



Parental Consent and Medical Form for Children and Young People

Updated May 2018

PLEASE FILL OUT USING BLOCK CAPITALS - THANK YOU

PLEASE NOTE: IF THIS FORM IS NOT COMPLETED IN FULL AND RETURNED THE CHILD/YOUNG PERSON WILL NOT BE ABLE TO PARTICIPATE IN CHURCH EVENTS/ACTIVITIES.

Main information

Full name of child/young person: Date of birth:

Tick Group/s attending below

Crèche: 0 - 2 Xplore: 2 - 4 Xchange: Reception Xcel: Y1 - 2 Xtreme:Y3 -4 Searchers: Y3 - 5 Connect :Y6 - 8
Thrive: Y9+ other event:

Parent/Guardians name(s):

Address: Postcode:

Main contact email address:

Mobile number: Home number:

Person(s) authorised to collect child/young person **or** please state if allowed to make own way home:

.....
(Once in Sch Yr 9 we will assume your young person can make their own way home unless otherwise stated above.)

Additional Emergency Contact

Name: Address:

Telephone no(s): Postcode:

Relationship to youth:

Medical & Allergies Details

(If more space is required please continue on a separate sheet, sign and attach. Any part left blank will be considered N/A)

Please give details of any allergies [including food allergies/dietary requirements], medical conditions or disabilities that your child/ young person has:

.....
.....

Please give details of **any medication** that your child/young person needs to take:

Asthma inhalers, anti-histamines for food allergies

.....
.....

If at any point your child/young person comes into contact with, or suffers from any disease which is, or may be contagious or infectious it is important that you inform us immediately and that they do not come to any events or activities until they are confirmed safe to do so by a health care professional.

Behavioural needs: Please give details of any behavioural needs that will help us best support your

child/young person:

.....

Please turn over to complete.....

Declaration

I give consent for my child/young person to take part in the events run by Chichester Baptist Church. Most activities will take place on the church premises but at times, when the weather is suitable, we may wish to take the young people off site at short notice. At other events or trip you would be informed and details given of cost, timing, transport etc. However, by filling in this consent form we will not then require you to complete a separate form for each event. This means all medical information must be given in full for us to ensure the best care can be given to your child/young person at all times.

I consider my son/daughter to be medically fit to participate in general group activities.

In an emergency and/or if I cannot be contacted, I am willing for my child/young person to receive necessary hospital or dental treatment including an anaesthetic.

NB If this is not acceptable please contact our Youth Ministry Leader. Thank you.

At times photographs/videos taken at our children's and young people's events may appear in church information material, on our church website or in the local press. No names of children will be printed without your consent. If you do not wish for this to happen you must inform us in writing and send to: Andy Morgan, Chichester Baptist Church, 124 Sherborne Road, Chichester, PO19 3AW.

I would like to receive emails about relevant CBC events throughout the year Yes No

PLEASE NOTE

By signing this form you have agreed to ensure your child/young person is aware of the importance of responding to reasonable requests and instructions of those leading the group. Your child/young person should understand that this is for their safety and that of the entire group. It is also to enable the smooth running of the activities so that everyone can enjoy participating. By signing this form you are also agreeing to collect your child/young person from the church or excursion if their actions are compromising safety or smooth running of events.

I acknowledge responsibility to inform the group leader should any of the information in this medical and consent form change.

In accordance with the General Data Protection Regulation, we are collecting this information solely to enable Chichester Baptist Church to run all our children's and youth programmes and to ensure we can contact you or another nominated adult in an emergency. Chichester Baptist Church will only keep your personal information for as long as it is required in compliance with our Data Protection Policy and in accordance with statutory requirements. If you have ticked the box above asking to receive information about other relevant CBC events we will add your name to our circulation list but you have the right to ask to be removed from this list at any time. If you would like your contact details removed, please contact the Church Office [tel: 01243 782582 or email: info@chichesterbaptist.org.uk]

Signed:..... Date:
(parent or adult with parental responsibility)