

Registration and Consent Form for 11-17's

WALLINGTON BAPTIST CHURCH

PARKGATE RD, SM6 0AH

For Sunday groups and Special Events held at the Church

Full name of child/young person

Name by which young person chooses to be known

☐ Male ☐ Female Date of birth

School attended

Address

Postcode

Telephone number

Who has parental responsibility for the child/young person?

Name

Name

Address (if different from above)

Address (if different from above)

Postcode

Postcode

Telephone no(s):

Telephone no(s):

Email

Email

Relationship to young person

Relationship to young person

In emergency:

Additional contact: Name

Relationship to young person

Telephone number(s)

Medical information

Child's/young person's registered GP:

Name

Address:

 Telephone no:

Please state date of last anti-tetanus injection (if known)

Whilst in our care it is important we know whether your child:

- suffers from any allergies

- is on any medication **(see page 3)**

- has any health condition or disability that we should know about:

- has any fears/other issues we should know about:

Declaration

I give permission for my son/daughter to take part in the normal activities of this group. I understand that separate permission will be sought for certain activities, including swimming, and other outings.

I understand that travel to and from activities is the parents' responsibility.

The leaders of the group may contact their members through phone calls, texts or emails within the advice of WBC Safeguarding Policies.

Photos may occasionally be put on the WBC Facebook Group Page, Website or displayed on the premises but will not be named. If you wish to stipulate no photos, please tick here ☐

In an emergency and/or if I cannot be contacted, I am willing for my child to receive necessary hospital or dental treatment including an anaesthetic. I am happy for the church to administer first aid or to send for an ambulance.

☐ Yes ☐ No (please choose)

The information given will be used, according to the legal requirements of the GDPR (Data Protection), on the basis of Legitimate Interest. The purpose is to help Safeguard your child and to keep you informed about activities. This form will be kept securely in the Church Office, the Group Leader also keeps a secured copy of some relevant details. Please speak to Jan Stone or Mary Lishomwa if any changes need to be made to the details or if you wish to change your permissions. The details on the forms will reviewed annually and destroyed if your child has not attended any activities for a year or whenever you request this. The Wallington Baptist Data Protection Policy is on the Notice Boards and the website.

Signed (parent or adult with parental responsibility)

Date

Please note that this declaration can only be signed by those with parental responsibility

Signed (by young person)

only required for Year 9 or above to indicate they are happy with the consent being given

Date

WBC has a Child Protection Policy that is available on the website or by request.

Any concerns can be raised with the Designated Persons for Safeguarding

Jan Stone 0208 669 9766

Gary Weithers 0203 712 8378

Chris Poole 0208 669 8733

WEBSITE www.wallingtonbaptist.org