



Tuesday 28th August – Friday 31st August 2018

9:30 a.m. – 12 noon

Please complete details below. ONE FORM PER CHILD. Anything written on this form will be held in confidence. We need to know these details in order to meet the specific needs of your child and to keep them safe during their time with us at Holiday Club.

Surname	
Forenames	
Date of Birth	
Age	
Gender	
Parent/Carer Name	
Relationship to child	
Address	
Post Code	
Telephone	
Mobile	
Email	
Friends attending	

Please confirm which days your child is able to attend the Holiday Club:

	Tues 28th Aug	Wed 29th Aug	Thurs 30th Aug	Fri 31st Aug
9:30 a.m. -12noon				

Please tick which age group your child is in. The Holiday Club is open to those attending from Reception year upwards September 2018:

4-5 (going into reception +y1)	6-7 (going into y2 +y3)	8-11 (going into y4-y7)

Please advise dietary requirements.	
Details of known allergies:	
Please advise if your child will bring medication (including asthma pumps):	
Can your child self-administer this medicine?	
Special / Education / Learning Needs	
Name of G.P.	
Name of G.P. Surgery	

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Please provide us with emergency contact information:

Emergency Contact (1) name:	
Emergency Contact (1) relationship to child:	
Emergency Contact (1) mobile number:	
Emergency Contact (2) name:	
Emergency Contact (2) relationship to child:	
Emergency Contact (2) mobile number:	

Loughton Methodist Church will take photos and video footage during the Holiday Club event in order to record the activities. Please also make sure you have completed a Media Permission form for under 18s. Safeguarding Form FC8' regarding photography. These photos may be used as part of the Church's publicity and for the use of our church magazine.

There are a limited number of places on this holiday club and successful application will be designated on a first come first served basis. We will confirm with you that you have successfully received a place.

The cost of this Holiday Club is £25 per child. Please make cheques payable to Loughton Methodist Church and cash can be received with submission of the form to the front Church Office. **Payment must be received with the application form.**

By signing this form below, you agree, to inform Loughton Methodist Church of any important changes to your child's health, medication, or needs and also of any changes to your address or any of the phone numbers you have given.

By signing this form below, you understand that **your child will need to be signed in and out of the Holiday Club each morning by an agreed parent/carer.**

By signing this form below, you agree that in the event of an illness or accident, you have given permission for medical treatment to be administered where considered necessary by a nominated first aider, or by suitable qualified medical practitioners. If you or your emergency contact, cannot be contacted and your child should require emergency hospital treatment, you authorise a qualified practitioner to provide emergency treatment or medication.

Loughton Methodist Church has a Safeguarding Policy and we are committed to ensuring the safety of your child by having a designated Safeguarding Officer and clear reporting procedures.

By signing this form below, you confirm that all details are correct to the best of your knowledge and you are able to give parental consent for your child to participate in Holiday Club 2018.

Signature (PARENT / GUARDIAN)

Print Name

Date

Please return this form (& media permission form) to Loughton Methodist Church Office with payment of £25 per child (cash or cheques made payable to Loughton Methodist Church).