

**Parental Contact Form Sept 2021 Christ Church Downend (Please fill in one form per child.)**

**Name(s) of parents/carers**

.....  
.....

Tel:..... I am happy to receive texts (tick if yes)

Address(es):.....  
.....  
.....

Email address.....  
.....

**Name and date of birth of child**

..... DOB  
...../...../.....

**Alternative emergency contact if you are unavailable:**

Name: ..... Tel:  
.....

Are you happy for us to use photos of children to advertise and inform others about our activities? **Tick any that apply, or comment.**

**I consent to my child's photo to be used on our website or in printed publications:**

**OR I do NOT consent for photos to be used of my child.**

OR –  
Other.....  
.....

**Please tell us any allergies/ dietary needs:**

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**Does your child have any medical conditions or needs that we need to be aware of (incl. asthma):**

.....  
.....  
.....

**If yes, what if any medication needs to be kept with leaders during sessions?.....**

.....  
.....

**If drinks, biscuits or other snacks are provided, are you happy for your child to receive these? Yes / No**

**COVID Restrictions:**

I agree to abide by the COVID guidelines: to observe current distance guidelines, to stay away if I or my child have symptoms; to wear a mask for indoor activities; to contact the team if I or my child test positive within 14 days of a visit to a church activity.

Signed:..... Date: ...../...../.....

Print Name: .....

***Thank you for coming to join us at Christ Church Downend!***

NB. We will store your data in line with GDPR and our own data policies. We will destroy your form on request OR when you stop coming for 2 full terms.