



ST MARK'S, ARMAGH
HOLIDAY BIBLE CLUB
AUGUST 14TH - 18TH (10AM - 12PM)
www.stmarks.armagh.anglican.org



REGISTRATION & PARENTAL CONSENT FORM

To assist us with our planning, we would be very grateful if you could return this Registration Form to the Church Office prior to the Holiday Bible Club. If this is not possible, please bring this form along to the Crozier Hall on the first day of your child's Holiday Bible Club attendance. Thank you.

LEADER IN CHARGE : Miss Hannah McCann

St Mark's Church Office, 44 Victoria Street, Armagh. BT61 9DT

Tel : 028 37523197

Participant's Name & Address : _____

_____ Date of Birth : _____ Sept 17 Primary School Class : _____

GP Name and Telephone Number : _____

Emergency Contact Number : _____

I am willing for (*child's name*) _____ to participate the Finding Heroes Holiday Bible Club and confirm that he / she is willing to participate as fully as possible.

Yes No

Parent's / Guardian's Signature : _____ Date : _____

(*Child's name*) _____ has the following medical condition(s) / allergies and requires the following medication, facilities and / or special diet (please give details)

I confirm that I have given consent for my son / daughter to attend the Guardians of Ancora Holiday Bible Club from August 14th to 18th 2017. In the event of he / she being taken ill or injured during the period of the above named activity so that surgical operation or serum injection becomes necessary, I hereby authorise the leader in charge to sign on my behalf any written forms of consent required, provided that the delay necessitated to obtain my signature might endanger his / her health or safety.

Yes No

I consent to my child's photograph being taken for St Mark's Church
Publicity Purposes

Yes No

Parent's / Guardian's Signature : _____ Date : _____

***Consent must be given by the person with parental responsibility
Please deliver and collect your child from the Church Hall Door
Please apply suncream before attending (if necessary)***