

# ChurchesTogether@GU16

## Holiday Club

The club is for 5-12 year olds, years R-7 and will take place at

**Mytchett Primary School, Hamesmoor  
Road, Mytchett GU16 6JB**

10am – 12.30 pm, **Tues** 27<sup>th</sup> to **Fri** 20<sup>th</sup> August  
+ Church Service Sunday 1<sup>st</sup> Sept 2019



**BOOK EARLY - LIMITED PLACES**

Please fill in **both** sections to book a place for your child

(Please use a separate form for each child.)

Child's full name:

Male / Female

Date of birth:

-   -

Friends with:

School:

Parent/Guardian's full name:

Address:

Postcode:

Home Telephone:

Mobile number:

Email address:

I give permission for my child's and my details to be entered on the church database.  
[this will only be used by us to contact you about activities run by the holiday club team]

Yes / No

I give permission for my child to be photographed and pictures used in publicity.  
[children will not be identified by name without your permission]

Yes / No

I would like my child to attend **MegaMakers** on **TUES**  **WED**  **THURS**  **FRI**  **SUN**

Please make cheques payable to **Churches@GU16**, writing child's name and '**MegaMakers**' on back  
**COST: £20 per child for the week.** Please return form, with payment, to:

John Rouse c/o Frimley Baptist Church, Balmoral Drive, Frimley, GU16 9AR

## CONSENT FORM

(If your child needs medical attention then the health services will want this information.)

Emergency contact name

(if person named above cannot be contacted):

Telephone number:

GP's name:

GPs telephone number:

Any known allergies or conditions:

**I CONFIRM THAT THE ABOVE DETAILS ARE COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE.** In the unlikely event of illness or accident. I give permission for any appropriate first aid to be given by the nominated first-aider. In an emergency, and if I cannot be contacted, I am willing for my child to be given hospital treatment, including anaesthetic if necessary. I understand that every effort will be made to contact me as soon as possible.

Signature of Parent/Guardian:

Date:   -   - 2019