



THE PARISH OF
ST WILFRID
HARROGATE

**REGISTRATION FORM FOR CHILDREN
WHO REGULARLY ATTEND CHURCH
SERVICES AND ACTIVITIES**

To be completed annually for all children and young people attending church groups

PART A: Child's details	
Full Name	
Address	
Home Tel or Mobile number	
Home email	
Date of birth	
School	
School year Group	
Activities your child participates in at Church	
Whilst your child is in our care it would be helpful for us to know whether he/she suffers from any allergies, is on any medication or whether there is anything else you would consider important for us to know, e.g. does your child have any special needs?	
Family doctor's name, address and telephone number	
Any special instructions?	
Is the child subject to any court order, or child protection plan. If so, please provide details:	

PART B Parent or Guardian's Details and Consent

Name	
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Name & Telephone Number of Friend/Relative in case of emergencies	
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My child will be brought and collected from the church	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Names and addresses of any adult authorised to collect my child in my absence:
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My child has my permission to travel to and from the group without me	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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I agree to my child attending and taking part in the specified activities. Signed (Parent/Guardian)	
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Date
