

St Johns Tots

Registration Form

Name of adult.....

Relationship to child[ren].....

Address.....

Contact telephone numbers

Mobile.....

Home.....

Name and date of birth of child[ren]

.....
.....

Second name and number (in case of emergency)

.....

Photographs

On occasions photographs may be taken during the sessions which will be put on the church website. Please specify below whether you consent for them to be taken of your child[ren]. Photos will only be taken and used in a way that is deemed to be appropriate and safe from misuse.

Yes I give my consent to photographs of my child[ren] being taken and used for official purposes.

No I do NOT give my consent to photographs of my child[ren] being taken and used for official purposes.

I also understand that should I wish to take any photographs during the sessions they must only be of my own child[ren] unless I have obtained consent from the other parents/guardians concerned.

Information sheet

I acknowledge receipt of the Information sheet and agree to abide by the requirements

Signed..... Date.....