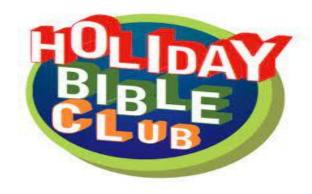


# Zion Baptist Church Bradford on Avon, Conigre Hill, BA15 1NJ



This is a free event for children aged 4-11 years

Younger children must be accompanied by a responsible adult

Monday 29<sup>th</sup> July to Friday 2<sup>nd</sup> August 2024

10am until 1pm

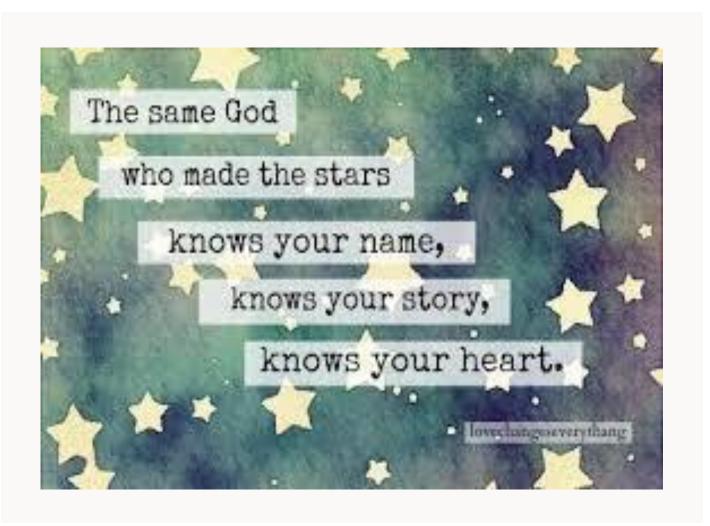
For planning purposes, please pre-register where possible.

A consent/registration form is available at <a href="www.zionbaptist.co.uk">www.zionbaptist.co.uk</a> or can be requested from Ellen at 07840741406.

### **KNOWING ME**



#### **KNOWING YOU**



Please complete this form and return as soon as possible by email or post: Mrs Ellen Gay ellengay@rocketmail.com; 12 Budbury Close, Bradford on Avon, BA15 1QG Anything written on this form will be held in strictest confidence. The leaders need to know these details in order to meet the specific needs of your child. All leaders have enhanced DBS checks from the UK government. Child's full name: Date of Birth: Name by which he/she is usually known: Phone number where I can be contacted in an emergency -Home: Mobile: If unavailable contact -Name: Phone number: **Relationship to Child:** In the event of illness or accident, having parental responsibility for the above-named child, I give permission for first aid to be administered where considered necessary by a first aider, or medical treatment to be administered by a suitably qualified medical practitioner. In the event of a medical emergency, leaders will endeavour to contact you as soon as possible using the contact telephone numbers given. I will inform the leaders of any important changes to my child's health, medication or needs, and any changes to our address or any of the phone numbers given above. During the time your child will spend with us, a limited number of photographs of activities in progress will be taken with robust safeguarding policy in mind for church purposes. On signing this form, we will assume that you have given permission for your child's photograph to be taken unless otherwise informed. Please indicate any medical conditions, medication, special needs, allergies or dietary requirements relevant to your child, and anything else that the leaders should know. I confirm that the above details are correct to the best of my knowledge. I give permission for my child to attend Zion Baptist Church's holiday bible club from

29th July to 2<sup>nd</sup> August 2024 10:00am to 1:00 pm, and to participate in all their activities.

Name	of parent/	guardian (	(printed):
D .			

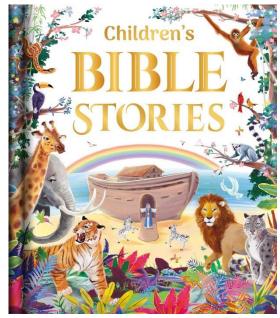
Date:

Signature:

Address:

## **CRAFTS**





# **BIBLE STORIES**

# SINGING



