



Holiday Bible Club Registration & Consent Form

Please return to: Horsell Evangelical Church,
High Street, Horsell, Woking, GU21 4SZ

or email: hbc@horsellec.org.uk

Child / Children's Full Name (s)

Age (s)

Address

Postcode:

Telephone

--

Emergency Contact Details

Contact Name:

Telephone:

GP's Name & Telephone No:

Known Medical Conditions, Allergies or Other Useful Information:

In the unlikely event of illness or accident I give permission for any necessary first aid treatment to be given by a responsible adult. In an emergency, if I cannot be contacted, I am willing for my child/children to receive hospital treatment, including anaesthetic, if considered necessary by the medical authorities.

The local newspapers may be coming to take photos, if you do NOT want your child/children's photo and name to be in the newspaper, please tick the following box. **No photos:** ☐

We would like to take photos and videos of the children for our own internal church use and possibly the church website. Please tick the following box if you do NOT agree. **No photos or videos:** ☐

[I give my consent for my child/children to take part in the activities of Holiday Bible Club.](#)

Parent / Guardian's Signature:

Printed Name:

--	--

Date: