

<b>Child's Information:</b>			
First Name:		Surname:	
Date of Birth:	/ /	Gender:	
Address:		Town / City:	
County:		Postcode:	
<b>Parent / Carer's Information:</b>			
First Name:		Last Name:	
Phone Number:		Relation to child:	
Address:		Town / City:	
County:		Postcode:	
Email:		Legal Guardian:	YES / NO
Allowed to collect child?:	YES / NO		
<b>Secondary Parent / Carer Information:</b>			
First Name:		Last Name:	
Phone Number:		Relation to child:	
Address:		Town / City:	
County:		Postcode:	
Email:		Legal Guardian:	YES / NO
Allowed to collect child?:	YES / NO		

**Emergency Contact Information ( in the event the listed parents are not available ):**

First Name:		Last Name:	
Phone Number:		Relation to child:	
Allowed to collect child in emergency?:	YES / NO		

**Medical Conditions**

**Does your child currently or previously suffer from the following?**

Asthma	YES	NO
Epilepsy	YES	NO
Migraine	YES	NO
Diabetes	YES	NO

**Any other serious illness? Please state:**

**Is your child allergic to any form of medicine? If yes, please specify below:**

NO	YES :
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**Is your child currently taking any form of medication? If yes, please specify below:**

NO	YES :
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**Does your child have any special dietary requirements? If yes, please specify below:**

NO	YES :
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**Please provide any further information you feel may be relevant to the care and well-being of your child:**

**Disclaimer**

At New Generation Church we aim to create a safe environment for children and young people during our activities. However, if a young person fails to follow instructions to behave reasonably and responsibly and as a result is injured or personal property is damaged, New Generation Church will not be held responsible.

**Parent / Guardian Consent for NGC Kids Church ( please select all as appropriate )**

YES / NO	I am happy for the child named above to take part in activities organised by New Generation Church.
YES / NO	I agree to this data being stored by New Generation Church in a secure place and in an online platform in order to ensure the safety and well-being of my child.
YES / NO	I am happy for my data to be used by New Generation Church to contact me about upcoming events operated by Kids Church.
YES / NO	I am happy for imagery and video of my children to be taken by New Generation Church staff during activities or productions and used for publicity material such as leaflets, KidsChurch online videos or website articles.

**Your right to withdraw consent**

You have the right to withdraw your consent at any time by contacting New Generation Church workers or by emailing us at [info@newgenerationchurch.co.uk](mailto:info@newgenerationchurch.co.uk). Please let us know if you want us to:

- Remove or change information/data we have about you;
- Make changes to the way that we communicate with you;
- Provide you with access to information that we hold about you;
- Or if you are unhappy with the way we have used your information.

Name ( Please print ):	
Signature:	
Date:	