

St John the Baptist Church, Needham Market Annual Consent Form

This form entitles the named young person to attend all regular clubs and events run by St John's Church, Needham Market. These may be held at St John's Church, The Ark, or other, specific named locations.

Name of Young Person:

Date of Birth:

Medical Information:

Is your child in good physical health and do you consider them to be fit to participate in activities?

YES/ NO

Does your child have ANY conditions requiring medical treatment, including medication?

YES/ NO

If YES, please give brief details on the other side of this form

Does your child have any special needs or learning difficulties that we should be aware of?

YES/ NO

If YES, please give brief details on the other side of this form

Is your child allergic to any medication/ food/ nuts/ bee stings etc?

YES/ NO

If YES, please give brief details on the other side of this form

Does your child use an inhaler?

YES/ NO

If YES, please make sure they bring it with them at all times

Name, surgery and telephone number of Doctor:

Declaration:

I agree to my child receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the qualified medical authority present.

Please note that only a parent or guardian can give consent for those under 18 years of age.

Full Name:

Relationship to the Young Person:

Telephone Number(s):

Second name and contact number in case of emergency:

Signed:

Date: