

**ST MARK'S CHURCH,  
REGISTRATION & CONSENT FORM  
FOR "ON YOUR MARKS" HOLIDAY CLUB 2012**

Could parents/guardians please complete a separate form for each child please.

FULL NAME ..... Boy/Girl

DATE OF BIRTH..... SCHOOL YEAR .....

ADDRESS .....

..... POSTCODE .....

HOME TEL. NUMBER ..... MOBILE .....

PARENT/GUARDIAN'S NAME .....

WHICH DAYS IS YOUR CHILD ATTENDING? (PLEASE CIRCLE)

FEB	13 <sup>TH</sup>	14 <sup>TH</sup>	15 <sup>TH</sup>	16 <sup>TH</sup>	13 <sup>TH</sup> -16 <sup>TH</sup>
	MON.	TUES.	WEDS.	THURS.	ALL 4 DAYS.

NAME OF PERSON COLLECTING CHILD.....

IS YOUR CHILD GOING TO WALK HOME ON THEIR OWN? YES / NO

DETAILS OF ANY KNOWN MEDICAL CONDITIONS/ALLERGIES OR OTHER RELEVANT INFORMATION OF WHICH THE LEADERS SHOULD BE AWARE (eg. Asthma, epilepsy, allergy to squash or gluten products etc.)

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I give my permission for the above child to attend 'On your Marks' between 10am and 12pm from 13<sup>th</sup> - 16<sup>th</sup> February at St. Mark's Church, 206 North Rd, Cardiff, CF14 3BL. I also give the leaders permission to act in the best interests of my child in the event of an emergency. This includes the giving of Emergency Aid by a qualified first aider. I give permission for my son/daughter's name to be added onto a mailing list for future use.

I am happy for photographs to be taken during holiday club which may be shown in church or used for publicity about this event, and/or forthcoming ones. Please notify the leaders in writing before the club begins if you are not happy for this to happen. Thank you.

Signed..... Parent/Guardian Date .....

Please return your completed form to: St. Mark's Church, 206 North Road, Gabalfa, Cardiff, CF14 3BL. Additional forms are available from [www.stmarks-cardiff.co.uk](http://www.stmarks-cardiff.co.uk).