Registration and Consent: Children’s Activities

**(**to be completed by an adult with parental responsibility for a child, annually)

Name of Group /Activity: Messy Church

**Family contact details:**

Child’s full name……….…………………………………..Date of birth ............................................

Full name of parent/guardian..............................................................................................................

Home address…………………………...…………………………………Home Tel No…….................. Parent’s/guardian’s mobile ……………...............…Parent’s/guardian’s e-mail………………………..

Family doctor ..................................School................................................. School year …...............

**About you/your child:**

Do you/Does your child have any food allergies? (please specify).....................................................

………………………………………………………………………………

Do you/Does your child have any medical conditions? (please specify).............................................

………………………………………………………………..

Are you/is your child on any medication? (please specify)…............................................................

……………………………………………………………………………………………………………..

Does your child have any special needs? (please specify)................................................................

………………………………………………………………………………………………..

Is there anything else you would like us to know about you/your child? ...........................................

……………………………………………………………………………………………………………

**Additional (emergency) contact details for parents/guardians:**

Details of an additional adult for contact in case of emergencies during group or activity time

Name............................................…………………….. Tel no ....................................

Their relationship to you/your child...................................................................

**Declaration**

I give permission for………………………. (child) to attend and take part in Messy Church activities.

**Signed (adult/parent/guardian) ………………………………… Date ……….....…………………..**

***The information requested on this form can be completed by a carer. Only those with***

***parental responsibility can sign the consent.***

**Photography/video recording consent**

We take the issue of safeguarding and our responsibilities under data protection regulations very seriously. This includes ensuring the appropriate use of images of children, young people and vulnerable adults.

As such we require the written consent of parents or carers to use photographs or video recordings of children, young people (under 18 years old) and vulnerable adults.

Any use of images is underpinned by our Safeguarding Policy. We will only caption with first names, if appropriate, and will not publish personal information such as addresses or other contact details by which the person in the photograph or video could be identified.

The images may appear in printed material (such as a parish magazine, newspaper, annual report) or may be used for display purposes, for publicity or to encourage wider community interest.

We may also pass images to local or national media or upload them to parish/ diocesan websites and social media, but only with the express permission of the parent or carer – see below.

Please tick all/any applicable statements:

**I consent to photos being used in locally circulated printed or emailed materials.**

**eg Parish Magazine, local newsletter or annual report**

**I consent to the photos or video recordings being uploaded to the Parish website.**

**I consent to the photos or video recordings being uploaded to the Parish Facebook pages.**

**I consent to photos or video being shared within Parish/congregational Whatsapp groups**

**eg the congregational “Church News” group and/or our “Messy Church” Whatsapp groups**

**I consent to the photographs being given to local/national media.**

**I would prefer that NO photos of my children are used for publicity purposes**

**Signed (adult/parent/guardian) ………………………………… Date ……….....…………………..**

***The information requested on this form can be completed by a carer. Only those with***

***parental responsibility can sign the consent.***