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**‘Good News in Uncertain Times’**

**2019 REGISTRATION FORM FOR CHILDREN’S/YOUTH ACTIVITIES**

*[Wrist Band Number: ………………………………………………..] Office Use only.*

**Name of child/young person: ……………………………………………………………………………………………**

**Age: ……………………… Date of Birth: …………………………….…………………………………………………...**

**Address: ……………………………………………………………………………………………………………………………**

**………………………………………………………………………………………………………………………………..**

**Name of responsible adult/parent: …………………………………………………………………………………..**

**Mobile phone No: …………………………………………………………………………………………………………….**

**Relationship of responsible adult to child/young person:……………………………………………..**

**Child/youth home address (if different from above: ………………………………………………….....**

**……………………………………………………………………………………………………………………………..**

**Name of church: ………………………………………………………………………………………………………………**

**Medical/Disability Information**

-any allergies: **……………………………………………………………………………….........................................**

-any disabilities we need to be aware of (physical/behavioural/learning): …………………………………………...........

- any medication(if so what): **………………………………………………………..........................**

-date of last anti-tetnus injection (if known): ……………………………………………………………………..

Name of GP and address: …………………………………………………………………………......................................................

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

***There are qualified First Aiders on site during ‘Momentum.’***

**Permission for Photos to be taken: yes/no** (delete where appropriate)

**Any other information helpful for leaders to be aware of:** …………………………………………………………

**I give permission for my son/daughter to take part in normal activities arranged for ‘Momentum’**

**Signed** (parent/carer)**: …………………………………………………………………………. Date: …………………………………………**

**PLEASE RETURN THIS FORM TO THE SOUTH WALES BAPTIST ASSOCIATION OFFICE:**

**Mrs Karen Kaneen. Association Administrator, South Wales Baptist Association, 54 Richmond Road, Cardiff CF24 3UR**