

JC (Junior Church) Groups Registration Form

Name:	
Address:	
Home phone number:	
Mobile phone number:	
Date of Birth	

Special Needs and Medical Details		
Does your child have any Special Needs you think it would be helpful for the group leaders to know about	YES	NO
Does your child have any medical condition that we should be aware of (e.g Asthma, allergies, Epilepsy, Diabetes)	YES	NO
If YES (to either of the above questions) please give details:		
<p>Please inform a Group leader if there are any changes in your child's special needs or medical condition</p>		

PERMISSION		
I give permission for my child to attend any of the groups listed below between the specified times and to participate in any associated activities		
Lift Off	Ages 0 - 4 years	Sunday 10.00 until 10.55 (parents pick up from Top Hall)
Infinity	Ages 4 - 7 years	Children are returned to parents in church at 10.55
Encounter	Ages 7 – 10 years	Children are returned to church
Distinctive	Ages 10 – 14 years	Young people return to church
iScape	Ages 14 – 18 years	Young people return to church
N.B Lift Off is for children of parents attending the Church Service		
If you are leaving your child at any other groups and leaving the church please inform group leaders and leave contact mobile number		
PHOTOGRAPHY		
Please tick if you consent to your child's Photo:	YES	NO
Being taken		
Displayed on Church notice boards		
Posted on Church Website		
Signed (parent/carer)		
Name in BLOCK CAPITALS		
Date		
Please note our responsibility for your child does not extend beyond these times		

This form is to be completed in compliance with Diocesan Pastoral Guidelines to enable us, as far as is possible ensure your child's Health and Safety whilst they are in our care