REGISTRATION & CONSENT

We're pleased to welcome your son/daughter to the one of the regular activities of Generation to Generation (G2G). G2G is the umbrella organisation for all the youth, children & families work carried out by All Saints' (Chilton) and St Matthew's (Harwell).

The information you give will help us provide the best care for your child during the G2G activities and also help us to communicate with you & your child. (Please keep us up-to-date with any changes).

Essential information about the particular group your child has joined will be provided to you separately (please request it if you have not received it with this form).

We are always more than happy to answer any questions you may have. Please feel free to contact us directly using the details at the foot of this letter or talk with the person who gave you this form.

To	be	comple	ted	bv a	parent	or	adult	with	parental	res	ponsibilit	:V:
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Child's Name:	Date of Birth:							
School attended:								
Address:								
	Postcode:							
(Telephone calls or SMS are the main way we will contact you in an	ne phone: Mobile phone: (Telephone calls or SMS are the main way we will contact you in an emergency or with urgent messages. Please inform us of changes.)							
Email:								
Alternative emergency contact(s):								
Phone(s):	Relationship to child:							
Allergies / Medical conditions / Special needs:								
☐ My child will be collected.	☐ My child can make their own way home.							
 I give permission for my son/daughter to take part in the regular on-going activities of G2G. I understand that the leaders will take all reasonable care in looking after my son/daughter but the leaders cannot necessarily be held responsible for any loss, damage or injury suffered by my son/daughter at the group. In an emergency, if I cannot be contacted despite all reasonable attempts to do so by the leaders, I give permission for my son/daughter to undergo emergency medical/dental treatment including the use of anaesthetics as considered necessary by the medical authorities. When, by prior arrangement, a G2G activity is away from the usual premises I agree to my child travelling by private transport. I understand that images of my son/daughter may be taken as follows: (a) By local media in covering activities which show the work of G2G in a positive light. (b) By photographers acting on behalf G2G for anonymous use: □ in display & publicity material □ on-line & social media ('X' to decline) 								
Signature:	Date:							



Print your name: _____ Relationship to child: _____