

## HOLIDAY CLUB PERMISSIONS & AUTHORIZATIONS 2017

(Please print, fill out, sign and bring to Holiday Club or fill this out at registration at Holiday Club)

Child/ren's Full Name/s: \_\_\_\_\_

Grade/s: \_\_\_\_\_

I, the parent/guardian of the above child/ren, give permission for my children or child/ward to attend the "**Let the Adventure Begin**" Holiday Club from 3 - 7 July 2017. I ask the leadership team to act "in loco parentis." I trust that the leadership team will take every precaution necessary to secure the safety of my child and I indemnify **Christ Church, Kenilworth** and its **leaders** against all claims.

Signature: \_\_\_\_\_

I, the parent/guardian grant you permission to administer basic first aid and/or over the counter medications (e.g. Panado):

Signature: \_\_\_\_\_

**MEDICAL AUTHORIZATION:** I understand that basic first aid services will be available and that adult supervision will be provided. If illness or injury occurs, medical/hospital care will be provided and I will be notified as soon as possible. I will not hold liable **Christ Church, Kenilworth** or **any other persons**, specific or general bodies, affiliated with this programme. The medical information listed on the registration form is accurate, and my child has permission to participate in all activities. I grant permission for authorized medical personnel to give medical treatment/diagnostic procedures to my child as deemed necessary within a reasonable degree of medical certainty. I understand that I am financially responsible for any such medical treatments and guarantee full payment to the attending physicians and/or medical institutions.

I, the parent/guardian understand and accept these terms:

Signature: \_\_\_\_\_

I, the parent/guardian allow videos and pictures of my child/ren to be used on the internet for advertising for future Holiday Clubs, trusting that the photos and videos taken are appropriate and will not belittle or humiliate my child/children.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

