



Dear Parent/Carer,

We are excited to invite your child to join the Teens' Cafe for all those who are in S1-S3. It will take place from 7-8 pm, during term times. We will enjoy playing games, pool, Playstation games, pizza and a Bible time together. If you have any questions, please contact [office@charleston-church.com](mailto:office@charleston-church.com) or check out the Teens' cafe section on our website. <https://charleston-church.com/whats-on/childrens-activities/teens-cafe/>

**Please complete the consent and information form below to ensure we have all the information needed to care for your child/ren**

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Child's Name:

Child's Date of Birth:     /     /

Does your child have any allergies? (Please circle answer) **YES    NO**

If YES, what is your child allergic to and how severe is it? (Leave blank if no allergies)

Please describe the necessary treatment in the event of an allergic reaction. (Leave blank if no allergies)

Does your child have any medical conditions that we should be aware of? (Please list or answer No).

Will your child need to take any medication while at the Holiday Club? (If Yes, Please list details, or answer 'no'):

Do you consent to your child receiving first aid care for minor injuries/ailments? **YES** **NO**

Do you consent to your child receiving emergency medical treatment in the event we cannot reach you?

**YES** **NO**

Do you give permission for your child to appear in photographs that may be used for publicity on our website (charleston-church.com) or our Church Facebook page? **YES** **NO**

How will your child get home after the Holiday Club? **Walk by self** **Collected**

Parent/Carer's Name:

Parent/Carer's Phone Number:

Name of Additional Emergency Contact Person:

Phone Number of Additional Emergency Contact Person:

Please sign below to give consent for your child to attend Jungle Explorers Holiday Club:

Thank you!