

Youth and Children Consent Form

Please complete one form per child in clear print



Canterbury
Baptist Church

Child's Details

Name	<input type="text"/>	
Date of Birth	<input type="text"/>	
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female
School	<input type="text"/>	
School Year	<input type="text"/>	
Church Group	<input type="checkbox"/> Crèche	<input type="checkbox"/> Ignite
	<input type="checkbox"/> Rise	<input type="checkbox"/> Impact

Parent/Carer's Details

Service Attended	<input type="checkbox"/> Morning	<input type="checkbox"/> Evening
	<input type="checkbox"/> Visitor	<input type="checkbox"/> None
	Parent/Carer 1	Parent/Carer 2
Name	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>	<input type="text"/>
Email	<input type="text"/>	<input type="text"/>
Mobile no.	<input type="text"/>	<input type="text"/>
Home no.	<input type="text"/>	<input type="text"/>

Child's Medical Details

NHS no.	<input type="text"/>
Dr surgery name	<input type="text"/>
Dr surgery no.	<input type="text"/>

Please inform us of any medication (both over-the-counter and prescribed) your child needs and any relevant medical information: allergies, illnesses, additional needs, behavioural info, phobias or anything else you feel we should know:

Emergency Contacts

(Different to Parent/Carer)

1	Name	<input type="text"/>
	Telephone no.	<input type="text"/>
	Relationship to child	<input type="text"/>
2	Name	<input type="text"/>
	Telephone no.	<input type="text"/>
	Relationship to child	<input type="text"/>

Consent

- ☐ I give consent for my child to take part in all CBC Y&C activities and any planned offsite activities.
- ☐ I give consent for my child to be included in promotional photos/videos for use within church ministry.
- ☐ I give consent for my child to receive urgent medical treatments and for a trained First-Aider to dispense plasters and common over-the counter medicines (paracetamol, sting relief cream, antihistamine medication (e.g. Piriton tablets), hydrocortisone cream) to my child with due diligence when appropriate.
- ☐ For school years 6 and above, I give consent for my child to travel unaccompanied to and from groups and to be contacted via CBC Y&C social media accounts.

At CBC we make every effort to ensure the safety of your child whilst in our care and it is our duty to report any suspicion of abuse or neglect, according to our policies and procedures available from a member of staff. If you have any questions regarding our policies or wish to raise a concern please contact Valerie Elms (contact details below).

Please notify the group leader if any information included in this form has changed. The information provided will only be used for purposes connected with administration, mission and ministry of Canterbury Baptist Church and in accordance with our Privacy Policy. Registered Charity No: 1179894

I consent to my contact details being used for regular CBC Y&C communication and agree with the policy as outlined in the CBC Privacy Notice (available on our website or in hard copy on request).

Signed _____ (Parent/Carer) **Date** _____

If there is anything you would like to discuss about your child in confidence, please contact the group leader.

Valerie Elms

Designated Person for Safeguarding
safeguarding@canterburybaptistchurch.org.uk

Hannah Putnam

Children's and Youth Ministry Coordinator
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