



**MANLY-LOTA
PRESBYTERIAN
CHURCH**

Growing Followers of Jesus

Enduring Permission Form

Kids/Youth Registration for Little Makers, Kids Church and Youth Group at MLPC

FAMILY DETAILS

Parent/Caregiver 1

Name: Mobile:

Email: Home Address:

Parent/Caregiver 2 (only include detail that differs from above)

Name: Mobile:

Email: Home Address:

Emergency Contact (alternative to parent/caregiver)

Name: Mobile:

Relationship to child: Home:

Privacy Declaration

- I/we give permission for the personal details given herein to be provided to the appropriate MLPC leaders &/or relevant supervisory/medical/emergency services personnel as deemed necessary.
- I/we understand the details given herein will be used by MLPC leaders to contact myself &/or my child/ren & that the details will not be given to any third party except as provided for above.

Authorisations & Expectations

- By completing this form, I/we hereby give permission for my child/ren to attend all scheduled MLPC activities, unless I/we explicitly advise the MLPC leadership team otherwise.
- In doing so I/we undertake to provide the MLPC leaders with any information relevant to the wellbeing of my child/ren prior to them attending any & all scheduled MLPC activities.
- I/we authorise our child/ren to travel in a car driven by an approved MLPC leader or a parent approved by an MLPC leader unless I/we explicitly advise the MLPC leadership team otherwise. (Your child/ren will not be in a vehicle driven by a learner or provisional licence holder or alone in the car with one leader.)
- I/we understand that every effort will be made to provide a safe environment for my/our child/ren to participate in. However in signing this form I/we authorise the leaders, in the event of an emergency, to obtain at my/our expense, any medical, ambulance, rescue or other services considered necessary.
- For activities where present with my/our child, I/we will take responsibility for the safety and supervision of my child.
- I/we acknowledge that in the course of some MLPC activities appropriate photos or videos may be taken of my/our child/ren by authorized personnel and may be shown to an internal audience only (ie, a photo montage at morning church). No other usage will occur without explicit permission given.
- I/we also acknowledge that being part of a community involves mutual care & consideration & therefore agree that unacceptable behavior may result in my/our child/ren being sent home &/or being temporarily or permanently prohibited from attending this group.
- I confirm that the information provided in this form is true and correct, and will advise MLPC of any subsequent changes or additions.

Signature of Parent/Caregiver

Print full name:	
Sign:	Date:

Child's Full Name:

DOB: Gender (please circle): M/F

School & Year Level:

Email (if applicable):
.....

**Which program are you
registering your child for?**

Tick all that apply

- ☐ Little Makers **2020**
☐ Kid's Church **2020**
☐ Youth Group **2020**

Authorisations

Do you give permission for your child to make their own way to or from MLPC events? Yes ☐ No ☐

Do you give permission for your child to take paracetamol if required? Yes ☐ No ☐

Do you give permission for your child's photo/video to be taken at MLPC events and displayed in MLPC publications, presentations or wall displays? Yes ☐ No ☐

Do you give permission for your child's photo/video to be taken at MLPC events and displayed on the MLPC website or facebook page? Yes ☐ No ☐

We will keep these details on file so we don't have to ask for them prior to each event, unless you request otherwise. Please advise an MLPC leader of any change to these details as soon as possible.

Medical

Does your child have any medical conditions that we should know about (please circle)? No ☐

- prescription medication ☐
- chronic illness or disability ☐
- severe allergies ☐
- other ☐

Dietary Issues

Does your child have any special dietary need that we should know about? No ☐

- i.e. food allergies or intolerances eg. Nuts ☐ Other ☐

Care Needs

Does your child have any care or custody need that we should know about? No ☐

- subject to a custody order ☐
- behavioural issues ☐
- psychiatric care ☐
- other ☐

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