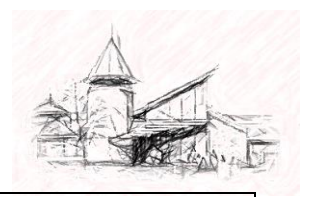


# St Mary's Youth Club Membership Form



Child's Name:		Date of Birth:	
Address:		Telephone no.	
		Mobile no.	

Parent/Guardian name:	
Address:	
Telephone no.	Mobile no.
Work no.	Email:

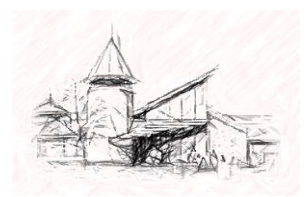
## Emergency Contact Information:

Emergency Contact 1		Emergency Contact 2	
Name:		Name:	
Relationship to child:		Relationship to child:	
Address:		Address:	
Contact no.		Contact no.	

## Medical Information:

Does your child have any physical or behavioral condition which we may need to be aware of?	Y/N	If yes please give details
Does your child suffer from any allergies?	Y/N	If yes please give details
Does your child have any special dietary requirements?	Y/N	If yes please give details
Please list any types of medication or lotions your child MAY NOT be given:		
When did your child last have a tetanus injection?		

# St Mary's Youth Club Membership Form



Water Confidence/ Swimming ability. Please indicate your child's swimming ability:			
Cannot swim		Swims confidently in a swimming pool	
Can swim a little in a swimming pool		Swims confidently outdoors e.g. lake/river/sea	

## Declaration

- Having understood the level of supervision to be provided, I agree to my child taking part in the youth club and activities on offer.
- I understand that all reasonable care will be taken of my child during his/her time at youth club and that he/she will be under an obligation to obey all directions and instructions given and observe all rules and regulations governing the youth club.
- I understand that if my child seriously misbehaves or is a cause of danger to him/herself or others, then I may be asked to collect my child. In such a situation there will be no obligation on the youth club to refund any money.
- In an emergency I agree to my child receiving medication and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as is considered necessary by the medical authorities present.
- I understand that in accordance with Archdiocesan child protection guidelines photographs/ images may be used for promotional or publicity purposes by St Mary's on the website or in other Archdiocese publications.
- I understand the extent and limitations of the insurance cover provided.

Full Name of Parent/Guardian (print please)	
Signed:	Date:

## To be completed by the participant:

I understand that for the safety of the group and myself, I will undertake to obey the rules and instructions given by the youth club leaders.	
Signed:	Date: