

**Heath Evangelical Church**  
**122 Whitchurch Road, Heath, Cardiff**

**Easter Holiday Bible Club – 16<sup>th</sup>- 18<sup>th</sup> April 2019 10.00am**

**Registration Form** (please complete and bring to the club)

**Name:** .....

**Date of Birth:** .....

**Address:** .....  
.....

**Emergency contact:**

Name: ..... Phone No: .....

**Any other information:** e.g. allergies, illnesses, special needs etc.

.....

..... (Continue on separate sheet if necessary)

How did you hear about the club? .....

Please tick

In an emergency and/or if I am not contactable, I am willing for my child to receive doctor/hospital or dental treatment including an anaesthetic. .....Yes      .....No

I understand that group photographs may be taken during activities and am willing for my child to be included .....Yes      .....No

Email .....  
(If you would like further information about future events)

Signed ..... Date .....  
(parent or adult with parental responsibility)

**T**

**W**

**Th**