

## Registration

Please fill in this form to book a place for your child at the Light Party.  
Please use a separate form for each individual child.

<b>Child's full name</b>	
<b>Sex (please circle)</b>	<b>Male/Female</b>
<b>Date of birth</b>	
<b>School</b>	
<b>Age group (please circle)</b>	<b>P1 P2 P3 P4 P5 P6 P7</b>
<b>Does your child have any medical conditions, allergies or intolerances?</b>	

### Please register my child for the Light Party

<b>Parent/Guardian's signature</b>	
<b>Parent/Guardian's full name</b>	
<b>Address</b>	
<b>Postcode</b>	
<b>Email Address</b>	
<b>Contact telephone number</b>	
<b>I give permission for our details to be entered into the church database</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>I give permission for my child's photograph to be taken during the Party. Note: Photographs will be used for church purposes only (e.g. church magazine, newsletter etc.).</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>In the unlikely event of illness or accident, I give permission for any appropriate first aid to be given by the nominated first aider. In an emergency, if I cannot be contacted, I am willing for my child to be given hospital treatment if necessary. I appreciate that every effort will be made to contact me as soon as possible. (If you are in agreement, please sign the adjacent box).</b>	

**Please complete this form and return it to:**

Culloden Balloch Baptist Church, Church Office, Wellside Road, Balloch, IV2 7GS  
or by email to [culloden.baptist@btconnect.com](mailto:culloden.baptist@btconnect.com)