



**All Saints Church, Cottenham
Sunday School/Samuel Group
Registration Form
2015-2016**

Child's full name	
Name used	
Date of birth	
School / class	
Parent/carer(s)	
Address	
Telephone	
Mobile number	
E-mail (parent)	

Any allergies, medical or other needs we should be aware of:

(Please ensure that we are informed of any changes during the year.)

- I give permission for my child to participate in Sunday School/Samuel Group on Sunday mornings.
- In an emergency I am willing for my son/daughter to receive treatment including an anaesthetic (we would, of course, attempt to contact you in the first instance).

I agree to photographs of my child being used as follows:

- for use in a Sunday School activity only (copies not brought home to be destroyed)
- for display eg in the church/hall
- for publication, eg in the church magazine or the church website (without names, unless separate consent is given, no faces online)

Signed: _____ Date: _____

Relationship if not parent: _____

We have an e-mail reminder list for the 9:30 service (aimed at under-sixes), which also serves to remind you of the week when there is no special provision for children at the 10:30 service. Tick if you'd like to be on the list!

Tuesday Church also has an e-mail list: tick here for that.