



Netherfield Chapel Broadlands

Mission Rescue Registration/Consent Form

Venue: Netherfield Chapel, Broadlands.

Netherfield. Milton Keynes

Date: 24th - 28th October 2011 9.30am-12.30pm

Childs Full Name

Sex M / F

Date of Birth

Address:

Phone Number:

Mobile Number:

Please register my child for Mission Rescue:

Parent/Carer Full Name:

Parent/Carer Signature:

Date:

Any Known Allergy/Condition:

In the unlikely event of accident or injury I give my permission for first aid to be given and if I cannot be contacted I give permission for my child to be given hospital treatment including anaesthetic if necessary. Every effort will be made to contact me.

Parent/Carer Full Name:

Parent/Carer Signature.

Date:

I give permission for photographs to be taken of my child

I give permission for my child's details to be entered on the church database:

Parent/Carers Signature: