

making your marks

APPLICATION FORM 2010

PERSONAL DETAILS

First name: _____ Surname: _____

Address: _____

Postcode: _____

Tel No: _____ D.O.B.: ____ / ____ / ____

School: _____ Year Group: _____

TO BE COMPLETED BY PARENT / GUARDIAN

Please state any health conditions that your son/daughter may have:

Does your son/daughter require regular injections or tablets? YES / NO

If yes, please specify _____

Is he/she on a special diet? YES / NO

If yes, please specify _____

Please give any other health information you wish the camp leader to have:

emergency contact 1

Name: _____

Telephone: _____

Relationship: _____

emergency contact 2

Name: _____

Telephone: _____

Relationship: _____

CONSENT

In the event of illness or accident, having parental responsibility for the above named child, I give permission for first aid to be administered where considered necessary by a trained first aider, if available, or medical treatment to be administered by a suitably qualified medical practitioner.

I give my consent to my son/daughter being given the following medication which I propose to send with them: (e.g. paracetamol)

If I cannot be contacted and my child should require emergency hospital treatment, I authorise an adult leader to sign on my behalf any written form of consent required by the hospital. However I understand that every effort will be made to contact me as soon as possible.

Some photographs and video taken on SUNI activities are used in publicity materials and on the SUNI website. I consent to photographs and video being used for such purposes. YES / NO

I certify that on signing this that the information given above is accurate.

I attach a **£20 non-returnable deposit** towards the total fee and **give my permission** for my son/daughter to attend the event.

Signed: _____ (parent / guardian)

Date: ____ / ____ / ____

POSTAGE

Please return the completed form AND £20 non-refundable deposit to:

Making Your Mark Weekend

Scripture Union Schools

157 Albertbridge Road

BELFAST, BT5 4PS