



Half term holiday club – The Sports Cafe – 14 February to 17 February 2012

Name _____

Address _____

Date of Birth _____ Telephone number _____

Contact in case of emergency _____

Special needs, including allergies and medication _____

School attended _____

Church attended _____

I hereby give permission for _____ (name of child) to take part in activities at St Andrews Community Centre and St Andrews Park, and my consent for medical treatment or first aid arising out of illness or accident.

Signed _____ Date _____

(Parent/guardian)

Please return to : Elaine Webster, St Andrews Church, First Tower, St Helier, JE2 3JA before
17 February if you wish to pre-book