

## Ignite Youth – Hope Church Luton

Dear Parents/ Guardians,

This form is so we as a Youth Team know that you consent for your child to be involved in activities of Hope Church Youth. Please read and complete this form by signing at the bottom to give your consent for your child to attend Hope Church Youth. If you have any questions please email me on [linda.hopechurch@gmail.com](mailto:linda.hopechurch@gmail.com)

<b>About your child</b>	
Name:	D.O.B:
School:	
Any medical/ dietary requirements that you think we as a youth team should be aware of?	
Do you give consent for the youth team to contact your child either by phone, email or social networking like WhatsApp? Contact will only be made for youth group related reasons.	
Please circle as appropriate:      I consent                      I do not consent	
During this year photographs/ videos of your child may be take at youth group activities. These may be used for general purposes within the church, such as website or the church Facebook page, posters, brochures and other printed material. Do you give permission for your child to be photographed and videoed for the above purposes?	
Please circle as appropriate:    Yes, in all instances                      Yes, with restrictions	
No, not in any circumstances	
<b>If any restrictions apply please state them here:</b>	
<b>Allergies</b>	
Does your child have allergies? Yes / No (Please circle)	
Please provide details if they have any allergies:	
Does your child have any medical conditions or special needs w should be aware of?	

Yes / No (please circle)

Please provide any necessary details:

Does your child need any extra support in group situations? Yes / No

Please provide any necessary details:

**About you**

Please could you provide us with information to be used in case of an emergency:

Name of contact 1:

Name of contact 2:

Relationship to the young person:

Relationship to the young person:

Contact number:

Contact number:

We as a youth team may contact you as a parent or guardian to inform you about youth related events. If you are happy for this to happen please complete the following information.

Email address:

Mobile number:

Print name:

Signed:

Date:

If you give permission for us to store this data on our database system; Churchsuite please tick the box.

- *The information is kept for the length of time that the children are part of the church programme.*
- *The information will be used only for the benefit of the leaders and helpers and will not be made available to other parties.*
- *The information will be stored on Churchsuite which is the secure database software that we used and on hard copy in a secure place.*

If you would like to know what data is stored or would like data removed then please contact Linda Geevanathan on [linda.hopechurch@gmail.com](mailto:linda.hopechurch@gmail.com)