

Elim Festival - Thursday 27th July – Saturday 5th August 2017**ATTENDEE BOOKING FORM (AGED UNDER 18)**

(This needs to accompany the Main Booking Form)

NAME _____

ADDRESS _____

CONTACT TELEPHONE NUMBER _____ (home)

_____ (mobile)

EMAIL _____

CHURCH _____

DATE OF BIRTH AND AGE AT 27TH JULY 2017 _____**CAMPING REQUIREMENTS:**

I WILL BE STAYING AS (please tick):

GUEST _____ WORKER _____ (Workers please complete Worker Form also)

FOR FOOD I WILL BE (please tick):

CATERED _____ SELF-CATERED _____

If you are not staying for the full event please state your arrival and leaving dates _____
and how many nights you will be on site _____**ATTENDEES COST £ _____ (pricing is detailed on the Main Booking Form)****ATTENDEE STATEMENT**

I agree that my child will abide by the rules (published on the Elim Festival website).

Parent's Signature _____ Date _____

CHURCH LEADER'S STATEMENT

Your Church Leader must complete this section.

I am in support of _____ attending Elim Festival. Date _____

Signature _____ Minister's name _____

Telephone _____ Email _____

How long have you known this person _____

If signing for a young person aged 12-15 who will be attending without a leader from your church, please contact Bex Wilson on 07706 803227 to share any necessary information.

Medical Information and Consent Forms – Under 18s

This information is strictly confidential. **Please use BLOCK CAPITALS.** It is a condition of acceptance that this form is completed in full.

Full name of child _____

Date of Birth _____ (DD/MM/YYYY)

Name of Parent/Carer _____

Parent/Carer Contact Telephone numbers: Day _____
Evening _____ **Mobile** _____

If Parent/Carer not at Elim Festival name of over 18 adult supervising them whilst attending
Mobile Number _____

Alternative emergency contact (someone not at Elim Festival) _____

Emergency contact telephone numbers: Day _____
Evening _____ **Mobile** _____

Name of GP _____ **Tel No** _____

GPs address _____

NHS no _____ **Date of last Anti-tetanus injection** _____

Details of any medical problem (e.g. allergies, asthma, epilepsy, diabetes, heart disease, bedwetting etc?) **or disabilities which may affect normal activity:**

Details of any emotional, mental health problems, learning or behavioural difficulties – please inform us of any details that will help our leaders care for your child in the best possible way. Informing us at this point means we can prepare for the welfare of your child before they arrive, which means they will enjoy their time with us much more:

Details of any medication required during Elim Festival (all medication to be labelled correctly and clearly with name and dose needed each day)

Please note: When booking for Elim Festival please ensure that you fully disclose the above information so that we can ensure the safety and the suitability of Elim Festival for your child. Failure to do so could cause unnecessary distress to your child and result in them having to be collected from Elim Festival. If you have any concerns please call us.

Please note, all medication required must be brought to Elim Festival, e.g. Nebulisers, inhalers, tablets, creams etc.

Details of any allergies or medically prescribed dietary requirements:

Is your child suffering from or have they suffered from any infectious disease in the last 12 months? Yes / No.

If yes, please give details _____

Authorisation for Medical Consent on site

I give consent for general 'over the counter' medication, i.e. Calpol, Paracetamol, Cough Mixture etc.

Signed _____ Parent/Carer Date _____

In the event of you being unable to contact me, I agree to any medical treatment and dental treatment being given to my child if required, including the administration of a general anaesthetic and to surgical operation/s, in accordance with the recommendations of a qualified medical practitioner.

Signed _____ Parent/Carer Date _____

Authorisation for Photographic Consent

Are you happy for your child to be involved in any photographs we take? Yes No

Do you give permission for such photographs to be used in Elim Festival publicity? Yes No

Authorisation to leave site without supervision (only applies to 16 and 17 year olds)

Signed _____ Parent/Carer Date _____

Authorisation for Children's Work Activities (only applies to 6-11 year olds)

Are you happy for your child to watch films with a PG certification? Yes No

Signed _____ Parent/Carer Date _____

Any changes to this form must be notified to the Elim Festival Office before arrival on site.