



First Ahoghill Presbyterian Church

“COME DINE WITH ME” KIDS CLUB – CONSENT FORM

Child's Name: _____

Date of Birth: _____ Class they are currently in: P

Address: _____ Postcode: _____

Mobile: _____ Email: _____

Emergency Contact: _____

Number: _____

WHAT WE NEED TO KNOW

Medical Conditions: _____

Medications: _____

Allergies: _____

Other Information: _____

By signing below, I give my permission for my child to attend 1st Ahoghill Presbyterian Church's Kids Club (28th – 30th June) and for my child's photograph to appear in any presentations.

Signed: _____ (Parent/Guardian)

Date: _____