

REGISTRATION FORM

DEEP SEA ADVENTURES is a holiday club for those of primary school age (5 - 11 years) from 22nd - 26th August 2023 hosted by Rochester Baptist Church at Moat House, Crow Lane.

Activities including games, craft, songs and Bible stories, run from 09:30 to 12:30 everyday on Tuesday to Friday. Saturday will be full of activities, including a free lunch, to which all the family are invited.

Completed forms can be returned by post to Deep Sea Adventures Team, Moat House, 8 Crow Lane, ME1 1RF; dropped off at the Moat House Coffee Shop; or emailed to churchadmin@rochesterbaptist.co.uk by 21st July 2023. If you have any questions, please contact Nick & Lydia via the email address above.

Child's Full Name:
Date of birth:
If your child is attending with a friend, please let us know their name as it may help wher organising the children into groups.
Friend's name:
Parent's/guardian's full name:
Address:
Postcode:
Telephone:
Email:



USE OF DIGITAL IMAGES

We may take digital photographs and video recordings of children who attend **DSA**. Images may be used by Rochester Baptist Church for display, presentation or on the official website. Images will not be used outside of church activities and will not be loaded onto any other website.

We will not use the personal details of any child in any text associated with the images on our website or any of our printed information. We will only use images of children that are suitably dressed and behaving appropriately.

Child's Full Name:		
	ission for you to to DSA or church a	ake photographs or video recordings of my child for the
Yes		No 🗌
2. I give perm	ission for you to u	se my child's image on our church website.
Yes		No 🗌

All parents/guardians who take images of their own children whilst at **DSA** are asked not to upload these images onto social media websites, or to only do so if they have sought permission from the parents/guardians of every child who features in that image.



MEDICAL CONSENT FORM

Child's Full Name:
Emergency Contact Name (1):
Telephone:
Emergency Contact Name (2):
Telephone:
GP's name:
GP's telephone:
Please describe relevant medical or special educational needs information, including any allergies and medications:
In the unlikely event of illness or accident, I give permission for any appropriate first aid to be given by the nominated first-aider. In an emergency, and if I cannot be contacted, I am willing for my child to be given hospital treatment, including anaesthetic if necessary. I understand that every effort will be made to contact me as soon as possible.
Yes No No



GDPR Consent Form

To comply with General Data Protection Regulations (GDPR), we require your consent to process and store your personal data provided in the attached forms. A copy of the church's Privacy Notice is available on the church's website: www.rochesterbaptist.co.uk. The data recorded within these forms will be entered into the **DSA** Holiday Club database for the purpose of registering each child.

Child's Full Name:	
• .	me by email prior to and during the Holiday Club foring me with any Holiday Club details.
Yes 🗌	No 🗌
I give permission for you to contact Holiday Club, including next year's H	me by email about future church events after the 2023 Holiday Club.
Yes 🗌	No 🗌
	t form is considered sensitive and therefore we require e it. This data may be shared with medical professionals cident.
I give permission for you to process a	and store the data on the Medical Consent Form.
Yes 🗌	No 🗌
after which it will be destroyed. All involved with running the Holiday (computer and a locked cabinet until 31st August 2026, data will be shared on a need-to-know basis with those Club. If at any time, you would like to withdraw your your personal details then please contact Nick & Lydia b.uk.
	these forms are complete and correct to the best of derstand the conditions of use on this form.
Parent's/guardian's full name:	
Signature of parent/guardian:	
Datas	