

<b>WASTEWATCHERS REGISTRATION FORM</b> <i>(Please use a separate form for each child.)</i>	
Wastewatchers will take place at from _____ to _____. Please fill in this form to book a place for your child.	
Child's full name	Sex: <b>M / F</b>
Date of birth	School
<b>Please register my child for Wastewatchers</b>	Parent's/Guardian's signature
Parent's/Guardian's full name	
Address	
Phone number	
I give permission for my child's and my details to be entered on the church database. <b>Yes / No</b>	

<b>WASTEWATCHERS CONSENT FORM</b> <i>(Please use a separate form for each child.)</i>	
Child's full name	
Address	
Emergency contact name	Phone number
GP's name	GP's phone number
Any known allergies or conditions	
<p><b>I confirm that the above details are complete and correct to the best of my knowledge.</b></p> <p>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.</p>	
Signature of parent/guardian:	Date: