



Appendix 10 – Registration and Medical Consent Form Kids Clubs

Information received is confidential and is being gathered for the purposes of serving your Child while in the care of Dalhousie Church. Any medical information collected here serves to authorize Dalhousie Church, and its staff and volunteers, to obtain medical assistance in emergencies.

Please fill in one form per child.

For the ministry year 2023 / 2024

In the case of custody agreements, please include the proper form authorizing Parental contacts.

Child/Student’s Name _____ Date of Birth _____

Address _____

Phone Number _____ Parents’ Work Number _____

Parent/Guardian Name(s) _____

Parents’ Email _____

Child/Student’s Health Card Number _____

Family Doctor _____ Phone Number _____

Allergies _____

In case of an emergency, please provide an alternate emergency contact

Name _____ Phone Number _____

Relationship to child _____

Does your child have any physical, emotional, mental, behavioural concerns or limitations that staff/volunteers should be aware of?

Yes No

If yes, please explain:



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Is your child bringing any medication with them? (for example, an EpiPen or inhaler) Yes No

If yes, please list.

The safety of your child is our primary concern. Precautions will be taken for their well-being and protection.

Payment

Circle option, you can pay for both semesters together or separately

Fall 2023 semester: \$30 **OR** \$50 **OR** with sibling **OR** subsidy Payment method: _____

Date: _____ Total: _____

Winter 2024 semester: \$30 **OR** \$50 **OR** with sibling **OR** subsidy Payment method: _____

Date: _____ Total: _____

Communication

A policy is in effect that communication is to be used solely for the dissemination of information. Please sign below to grant permission for Children/Youth Program Ministry Personnel (staff and volunteers) to communicate with your child via telephone, email, social media and text:

- | | |
|---|--|
| <input type="checkbox"/> Telephone (home / work / cell) | <input type="checkbox"/> Social Media Networks |
| <input type="checkbox"/> Email | <input type="checkbox"/> Text messages |

Photos

Please sign below to grant permission for the reasonable use of pictures containing your child in any or all of the following ways:

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Brochures/Promotional material | <input type="checkbox"/> Church |
| <input type="checkbox"/> Website/Social Media | <input type="checkbox"/> Newsletters |
| <input type="checkbox"/> Videotaping | |



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Purposes and Extent

Dalhousie Church is collecting and retaining this personal information for the purpose of enrolling your child in our programs, to assign the student to the appropriate classes, to develop and nurture ongoing relationships with you and your child, and to inform you of program updates and upcoming opportunities at our organization. This information will be maintained indefinitely as it is a requirement of our insurance company and legal counsel. If you wish Dalhousie Church to limit the information collected, or to view your child's information, please contact us.

Parent/Guardian Options

I have read, understood, and agree with above and sign it to cover all Children/Youth Program activities for the program year effective as stated below. A separate Letter of Informed Consent will be sent home for off-site activities and activities of elevated risk.

I/we, the parents or guardians named below, authorize the Ministry Director or one of Dalhousie Church's Ministry Personnel to sign a consent for medical treatment and to authorize any physician or hospital to provide medical assessment, treatment or procedures for the participant named above.

I/we, named below, undertake and agree to indemnify and hold harmless Ministry Personnel, Dalhousie Church, and its Leaders from and against any loss, damage or injury suffered by the participant as a result of being part of the activities of Dalhousie Church, as well as of any medical treatment authorized by the supervising individuals representing Dalhousie Church. This consent and authorization is effective only when participating in or traveling to events sponsored by Dalhousie Church.

Parent Signature _____

Printed Name _____ Date _____