



Two by Two Parent & Toddler Group

Membership & consent Form

ising a consent torm
Post Code:
Phone no:
onditions, allergies or anything else it would be useful to know
owing and consent to the Child(ren) named above/overleaf

attending Two by Two:

- The Child(ren) will be registered for every session and once registered the Leaders of Two by Two have a Duty of Care for the Child(ren) and myself as Parent/Carer. In respect of my Child(ren) I recognise that I share that Duty of Care when present. Whilst Leaders will exercise a Duty of Care they cannot be held responsible for any loss, damage or injury suffered during, or as a result of, any activity.
- Two by Two is part of the TBC Families provision and will have a Christian ethos.
- TBC will take special care of my personal information and contact details and information about my child in accordance with Data Protection Legislation (May 2018) in accordance with their Privacy Policy (see Thornbury Baptist Church website).
- Leaders will communicate with the Parent/Carer about Two by Two and will also include information about other events and activities.
- Activities will usually take place within the premises of TBC but may, on occasion take place elsewhere.
- Should I not be present then the adult that accompanies my child/ren is responsible for them and may authorise should the Child(ren) become ill or have an accident and that medical treatment will be administered by a suitably qualified person and that, in an emergency.
- I am happy for photographs to be taken and used on the TBC Web-site or in the Church for publicity reasons (delete as appropriate) YES/NO

Signature of

Parent/carer

Date of Signature



Following the way of Jesus, loving God, one another & the world.

Thornbury Baptist Church (TBC) operates within a vulnerable person safeguarding policy which is available on website: www.thornburybaptistchurch.org.uk 01454 419118

END OF F	9RM

Office Use Only: Date details entered onto register:

TWO BY TWO MEMBERSHIP & CONSENT FORM

DETAILS OF ADDITIONAL CHILDREN

Details of Child	
Full Name:	Date of Birth:
Address:	
Post Code:	
Details of Parent/Carer:	
Full Name(s):	
Address (if different to Child)	
Home no:	Post Code:
Mobile no.:	
E-mail address:	
Relationship to Child:	
Medical and Emergency details:	
Name of GP and Surgery address:	
Post Code:	Phone no:
Details of regular medication, medical coof:	onditions, allergies or anything else it would be useful to know
	END OF FORM
Office Use Only: Date details entered onto r	egister: