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 **Holiday Activity Registration Form**

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| Child Details: |
| Name: | KRSC Member: Y / N |
| Date of birth: | Age: |
| Parents Details: |
| Title: | Name: |
| Address: |
|  |
|  | Postcode: |
| Contact Number (Mobile): |
| Alternative Contact Number: |

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| --- |
| Medical Details: |
| Does your child have any medical or dietary requirements: |
| Medical: |
|  |
|  |
| Dietary: |
|  |
|  |

Agreement:

I agree to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(name)* taking part in the sporting activities held during the holiday activity programme, and I indicate, **with a tick**, that:

(a) I agree to my son/daughter participating in the activities described

(b) I acknowledge the need for my son/daughter to behave responsibly

(c) I am aware that all activities carry an element of risk & I am happy for my child to take part

(d) I am aware that KRSC accepts no responsibility for electrical items brought into the Centre