We may take photos which may appear in our publications, website, or social media.

**Photo Consent**

**First Aid**

I give permission for first aid to be administered to my child if needed whilst at toddler group.

Signature Name Date

I grant full rights to the images resulting from the photography and any reproductions or adaptations of the images for publicity or other purposes to help achieve the groups aims.

I consent to images of my child being used and stored.

Signature Name Date

Signature Name Date

To keep me informed about St Thomas’ toddler groups and related activities

To keep me informed about news, events, activities, services, and fundraising at St Thomas’

**Data Consent**

By signing this form, you are consenting to St Thomas’ holding and processing your personal data for the following purpose (please tick the relevant boxes if you grant consent):

I consent to the church contacting me by Post Phone Email

**Details you feel we should be aware of** *(eg. Allergies, dietary requirements, medical conditions etc.)*

Name Date of Birth

St Thomas’ Toddler Group Registration Form

**Details of Child/ren:**

Name Date of Birth

Name Date of Birth

Name Date of Birth

***Alternative***

Emergency contact

Name Phone

Email

Phone

Address

Parent/Carer’s name