



**URBAN
SAINTS**
GUILDFORD

USG Parental Consent & Application Form – Whitsun and/or Summer Camp

Whitsun Camp: 24th – 27th May 2019

Summer Camp: 17th – 30th August 2019

I am applying for my son to attend: Whitsun Camp 2019 Summer Camp 2019
(Please tick either/both – as appropriate.)

Urban Saints Guildford is registered under the Data Protection Act. All of the data given on this form will be held and used in accordance with this act.

SECTION 1 – CONTACT INFORMATION. *This will help us to get in touch with you, should we need to, both before and during these residential activities.*

Name of son:	Date of birth:
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Home address:	Postcode:
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Contact telephone numbers of parent/carer (if we need to speak with you prior to a camp):		
Name of parent/carer:		
Daytime:	Evening:	Mobile:

Address of parent/carer <u>during</u> camp – if different from the home address above: (Please provide separate address details for each camp where necessary.)	
	Postcode:
	Postcode:

Contact telephone numbers of parent/carer <u>during</u> camp – if different from the contact telephone numbers above: (Please provide separate numbers for each camp where necessary.)		
Name of parent(s)/carer(s):		
Daytime:	Evening:	Mobile:

E-mail address: (Please print clearly – we will use this e-mail address to send out information such as kit lists.)
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SECTION 2 – MEDICAL INFORMATION. *This will help us to give the best possible care to your son during these residential activities.*

Name of family doctor:

Address of family doctor:

Postcode:

Phone number of family doctor:

Please give details of any allergies affecting your son:

Please give details of any medication your son is currently taking, the dosage and whether it can be self-administered:

Please give details of any contagious or infectious diseases your son has suffered from in the past 3 months:

Please give details of other recent illnesses or on-going medical conditions:

Please give the date of your son's last anti-tetanus injection:

Please give details of any special dietary requirements your son has:

If supervised swimming is offered on the programme, do you give consent to your son taking part?

(Please tick as appropriate.) YES What distance can he swim?
NO

Please give details of any activities included in the programme in which your son may not participate:

Please give any other information you think may be useful to us in caring for your son, eg. suffers from travel sickness:

SECTION 3 – PAYMENT DECLARATION

I am paying for (please tick as appropriate):

Whitsun Camp only: £80 (or £100 if late, i.e. application and/or payment after 26th April)

Summer Camp only: £380 (or £420 if late, i.e. application and/or payment after 7th June)

First week of Summer Camp only (yrs 5/6 only): £260 (or £290 if late, i.e. application and/or payment after 7th June)

Both Whitsun and Summer Camp: £440 (or £480 if late, i.e. application and/or payment after 26th April)

Whitsun Camp and first week of Summer Camp only (yrs 5/6 only): £330 (or £360 if late, i.e. application and/or payment after 26th April)

At USG we try to minimise the cost of our residentials and, as such, rely on significant donations to keep our camps financially viable. If you would like to make a donation to help with the cost of Camp it would be greatly appreciated. Donations (but not Camp fees) are eligible for Gift Aid; if appropriate, please complete the attached Gift Aid form and return it with this application. Payment of Camp fees and donations may be made as a single transaction – please just add your donation to the Camp fees.

I would like to make a donation:

(Please tick as appropriate.) YES Please state the amount:
NO

Chosen payment method (please tick as appropriate): cheque (enclosed with application) online payment

Please make cheques payable to: **Urban Saints Guildford**

Please make online payments using: Sort Code: **30-93-74**, Account Number: **00318381**

For online payments, please use the payment reference to indicate which camp(s) your payment covers ('WC-' for Whitsun Camp only, 'SC-' for Summer Camp only, 'WSC-' for both camps) together with the initials of your son and his surname – or as much of it as possible. E.g. WC-JSmith, SC-JSmith or WSC-JSmith

Section 4 – AUTHORISATIONS. *Relevant sections to be read and signed by a parent or other adult with parental responsibility and your son, if age 13 or over before 31st August 2019.*

I give permission for my son to take part in these residentials. I understand the nature of the activities that will be undertaken and the travel arrangements.

I understand that the leaders will take all reasonable care in the running of Camp, but I acknowledge the possibility that my son may, for a short time, be out of sight of a leader. I understand that personal accident insurance is my responsibility and that the leaders cannot be held responsible for any loss, damage or injury suffered by my son arising from either camp.

In an emergency, if I cannot be contacted despite all reasonable attempts to do so by the leaders, I give permission for my son to undergo emergency medical/dental treatment including the use of anaesthetics as considered necessary by the medical authorities.

I confirm it is acceptable for my son to be given Paracetamol and plasters if necessary.

I give permission for Urban Saints to process and store the personal data given on this form for use in relation to my son attending this residential and for safeguarding records. Urban Saints will never sell or swap our data with another organisation and will store our details securely, respecting our trust and privacy as detailed in the Urban Saints privacy policy: www.urbansaints.org/privacypolicy/

I understand that if my son grossly misbehaves at this residential then the organisers may forbid them from further participation and require me to collect them at my expense. Cigarettes, drugs and alcohol are forbidden, and failure to abide by this rule may constitute gross misbehaviour. I agree to pay for deliberate damage to property caused by my son.

By applying for either camp I ask for my son to become (if not already) a member of Urban Saints Guildford.

I agree to pay camp fees in full by **26th April 2019** when applying for Whitsun Camp or both camps, or by **7th June 2019** if applying for Summer Camp only. I understand that an application or payment received after these deadlines will be charged at the higher rates detailed in section 3.

I confirm that, to the best of my knowledge, the details on this form are correct and I recognise that it is my responsibility to notify the camp organisers Dewi Eburne (Whitsun) and Dan Price (Summer) if any of the details on this form change prior to each camp.

Signature of parent or other adult with parental responsibility:

Date:

and

Signature of son (if age 13+ before 31st August 2019):

Date:

From time to time we may like to use photographs and/or videos of young people taking part in group activities in publicity for the group, or we may wish to pass on material for use in publicity, publications, promotional/training videos and websites produced by Urban Saints nationally. No personal details, such as names, appear with photographs or videos unless we obtain specific parental permission first.

If you are happy for us to use photographs and/or videos of your son in this way, please sign below.

I consent to photographs/videos of my son being used within Urban Saints for the purposes mentioned above. I understand that their name or other personal information will not be used unless my permission is obtained first.

Signature of parent or other adult with parental responsibility:

Date:

and

Signature of son (if age 13+ before 31st August 2019):

Date:

Whitsun Camp (24th – 27th May 2019):

Please complete the following if your son will be attending Whitsun Camp 2019:

I accept the booking conditions and give permission for my son to attend Whitsun Camp 2019.

Signature of parent or other adult with parental responsibility:

Date:

and

Signature of son (if age 13+ before 31st August 2019):

Date:

Summer Camp (17th – 30th August 2019):

Please complete the following if your son will be attending Summer Camp 2019:

My son is in Year 5/6 and will be taking the option to attend Summer Camp for the first week only (returning Friday 23rd August):

(Please tick as appropriate.)

YES

NO

N/A

Transport is required:

(Please tick as appropriate.)

To Summer Camp

From Summer Camp

I accept the booking conditions and give permission for my son to attend Summer Camp 2019.

Signature of parent or other adult with parental responsibility:

Date:

and

Signature of son (if age 13+ before 31st August 2019):

Date:

Please return this form (together with payment and Gift Aid form, where appropriate) to:

***Urban Saints Guildford Camps
145 Farnham Road
(Road access via Abbots Close)
Guildford
Surrey
GU2 7RL***

Or hand it (in an envelope, please) to Graham Harrington at USG on a Friday evening.