St. George's Hurstville Anglican Church Comprehensive Permission Form



To be completed for all children under 18 years old. Effective from 1 Jan 2024 to 31 Dec 2024 in relation to all church activities.

arent / Caregiver 1	
Name:	Home Phone:
Email:	Mobile:
Home Address:	
arent / Caregiver 2 (only include if	
Name:	Home Phone:
Email:	Mobile:
Home Address:	
mergency Contact (alternative to p	parent/caregiver)
mergency Contact (alternative to page 1)	parent/caregiver) Home Phone:

Privacy Declaration

St. George's Hurstville Anglican Church is exempt from the requirements of the *Privacy Act 1988* as it is a "small business". However, we seek to deal carefully with the personal information we collect and to do so in a manner consistent with your reasonable expectations.

The personal information in this form will be made available to:

- (a) the church leaders, including the youth leaders, involved in the running of the activities in which my child participates, and
- (b) medical and emergency services if considered necessary.

Authorisations & Expectations

- I give permission for photos and videos of my child taken to be displayed publicly (online and in print).
- I give permission for my child to participate in online video meetings and for them to be recorded.
- I give permission for my child to attend all church activities including youth group and the mentoring program.
- I give permission for my child to make their own way to and back from all church activities including youth group and the mentoring program.
- I give permission for my child to travel in a car driven by an approved leader or parent who does not hold a learner or provisional red license.
- I authorize the church to obtain at my expense any medical (including taking paracetamol), ambulance, rescue or other services that are considered necessary for my child.
- I acknowledge that being part of a community involves mutual care and consideration, and therefore agree that unacceptable behavior may result in my child being sent home and being temporarily or permanently prohibited from attending church activities.
- I understand that the church will not be held liable for any property loss or damage or any physical injuries.
- I will provide the church with any information relevant to the wellbeing of my child prior to him or her attending a church activity.
- I confirm that the information given in this form is true and correct and will advise the church of any changes.

Exceptions					
Please list down any exceptions to the above here:					
Signature of Parent / Caregiver					
Print full name:					
Time fair flame.					
Sign:	Date:				
If you have any questions about this permission fo	rm, please contact Rev. Alan Lam on 0403191552				

Child – Personal Details

Name:	M / F:	DOB:	
School:	Grade:		
Email:	Mobile:		
Medicare number:	Position on card:		
Medicare expiry date:	Ambulance cover Y / N:		
We will keep these details on file unless you request otherwise changes to these details. Medical and Care Needs			
Does your child have any medical conditions that we should know about e.g. prescription medication, chronic illness, medical allergies etc.? Yes No Does your child have any care needs that we should know about e.g.			
behavioral concerns, psychiatric are etc.?	Yes 🗌 No 🗌		
Is your child capable of swimming more than 30m unassisted?		Yes 🗌 No 🗌	
Is there anyone who is legally restricted from seeing If yes, please indicate their name and relationship:	Yes No No		
Dietary Issues Does your child have any special dietary needs that y	we should know		
about e.g. food allergies etc.? If yes, please provide further details and plans:		Yes 🗌 No 🗌	
Please provide any further details as requi	red:		