

**Bored on
Friday Nights?**



**9-11 pm
boys and girls 12-18 years**

**Neillsbrook Community Centre,
Randalstown
Friday 16th May 2008 for 6 weeks
£1 per night**



**For further information or to register contact:
Sports Development Officer, Antrim Borough Council
T: 028 9446 3113 E: janine.harvey@antrim.gov.uk**



REGISTRATION / PARENTAL CONSENT FORM

(Please complete one form per child - thank you).

**Registration Form must be returned by Thursday 15th May 2008 to
Sports Development Officer, Antrim Borough Council, 50 Stiles Way, Antrim, BT41 2UB.**

Anything written on this form will be held in confidence. The leaders need to know these details in order to meet the specific needs of your child.

Child's full name:

DoB:Age:

Name by which he/she is usually known:

Address:.....

Phone number where you can be contacted in an emergency:

Home:

Work:Mobile:.....

If unavailable contact: (Name)

Phone no (including code):.....

Relationship to Child:

Name of GP:Phone no of GP:.....

Details of any known conditions, allergies etc (e.g. asthma, diabetes, epilepsy) and any medication being taken:

.....

Any other special needs, requirements or directions that would be helpful for the leaders to know about:

.....

I will inform the leaders of any important changes to my child's health, medication or needs and also of any changes to our address or to any of the phone numbers given above.

In the event of illness or accident, having parental responsibility for the above named child, I give permission for first aid to be administered where considered necessary by a trained first aider, if

available, or medical treatment to be administered by a suitably qualified medical practitioner.

If I cannot be contacted and my child should require emergency hospital treatment, I authorise an adult leader to sign on my behalf any written form of consent required by the hospital. However, I understand that every effort will be made to contact me as soon as possible.

Transport may be available. Please indicate if you require transport? YES NO

I confirm that the above details are correct to the best of my knowledge. I give permission for my child to attend the Floodlit Football. Photographs of activities are taken for internal and external publicity.

If you do not wish for your child's photograph to be taken please tick this box.

Signature:(Parent/Guardian)

Date:.....

Name printed in full:.....