



Children's Week 2023 – Medical Information Form

Please only complete this form if you or any of your children have an allergy or medical condition, we need to be made aware of and we will pass this onto the First Aid team.

Please complete the form below and hand in along with your registration form to the presbytery.

We ask for two Emergency Contact names in case we cannot reach you.

Adult Helper Name & Number:	
Emergency Contact Name & Number 1:	
Emergency Contact Name & Number 2:	

Child or Adult Name	
Childs Date of Birth	
Medical Condition/Allergies	

If your child needs medicine administered, you will have to speak directly to the First Aider on the day and complete a Medicine form and sign this.