

LIFT OFF
2017

...KEEP THIS SECTION TO REMIND YOU...

Dear Parent/Guardian,

This year, as usual, we are running our free Easter Holiday Club for children from Reception to Year 6 – our 29th so far! The club will run each day from 10am until 12.30pm, **Tuesday 4th to Friday 7th April.**

This year our theme is 'Lift Off!' We will tell stories from the Bible, have crafts, lively songs, videos, competitions, and drama. There will also be a **Family Evening on Thursday 6th April from 6.30-7.30pm.**

We find so many children want to come that we have to register children in advance. We will phone or email you to confirm every child we register. Please allow us a week to contact you, otherwise you must assume that we haven't received your form. Please only register if you intend to come as we don't want to disappoint other children. You may call the church office (020 8245 9152) or Vicar (020 8360 1749) if you would like further details. Our preference is for children who can come for all four days.

Please register your child using the form opposite and return it to: **St Thomas Church Office, Prince George Avenue, Oakwood, London, N14 4SN.**

(Applications may also be left at the Vicarage, 2 Sheringham Avenue)

The entrance to our church hall is at the back of our complex on Prince George Avenue. There is a car park, which is accessible from Prince George Avenue; exit onto Sheringham Avenue.

We look forward to seeing you!

ST THOMAS HOLIDAY CLUB

4th – 7th April 2017, 10am – 12:30pm



LIFT OFF!
2017

FREE

For Reception to Year 6

For Older Siblings:  

For those in school years 6 to 9 we have our YGnite Holiday Club from 3 to 5pm on Tuesday to Thursday. Hear talks from the Bible, have some food, play games, have fun and make friends!

For more information contact **Mark Jackson** on mark3jackson@gmail.com or the office on 020 8245 9152.

See the registration form on the church website: www.st-toms.org.uk.

 **ST THOMAS OAKWOOD**

Prince George Ave, Oakwood, N14 4SN
E-mail: office@st-toms.org.uk
Tel. 020 8245 9152

My child will normally be collected by the following adult(s) at 12.30pm

Name/s _____

Please complete the following section and give details.

Does your child suffer from any allergy or recurring illness?	
Does he/she take any regular medication?	
Any other information we should know about? e.g. special dietary requirements, special needs etc. (We may need to discuss whether we can cater for your child)	

Name, address and telephone number of your child's registered GP

If it becomes necessary for my child to be given urgent medical treatment, and I cannot be contacted by telephone or any other means to authorise this, I hereby give my general consent to any medical treatment, judged to be necessary and urgent, by the nominated first aider or a medical practitioner and I authorise the leader in charge to sign any document required by hospital or other authorities. I understand that every effort will be made to contact me as soon as possible.

In accordance with the Data Protection Act I understand a record of the details on this form will be kept on a data base for use by the church only. Photographs and video may be taken of children during this event for use in future publicity, either printed, shown in church or on the church website.

My signature indicates acceptance of all the above.

Signed _____

Date _____

Registration Form

Please complete registration form, cut it off and return it to St Thomas Church Office

I give permission for my child _____

(full name) to attend **Lift Off! Holiday Club 2017 (4th-7th April)** and to participate in all the organised activities.

Name by which child is known (if different from above)

Boy or Girl _____ Date of Birth _____ Age _____

School Year _____ School _____

Does your child regularly attend a Church / Sunday School? **Yes/No**

If Yes, which one? _____

Name of a friend also attending **Lift Off! Holiday Club 2017**

If you know your child will **not** attend any of the days please indicate here

Your details

Name of Parent/Guardian _____

Home Address _____

_____ Postal Code _____

Home Telephone _____

Mobile telephone _____

E-mail (*legible please*) _____

Other emergency contact details: