



Please note that Singleton Alive 2025, will be held at the Australian Christian College (109-129 Kelso St), next door to Lancasters.

PERMISSION NOTE

Please fill in **ONE** Permission Note per family (i.e. If you are the parent of children from one family and a guardian of children from another family, you will be required to fill out this form **twice**).

(PLEASE PRINT AND ANSWER ALL QUESTIONS ON THIS FORM)

Childs Full Name	Year at School 2024	Child full Name	Year at School 2023

*Children are Grouped according to their school year in 2025: *K-2 MINIS (M) *YR 3-5 KHAOS (K) *YR 6-12 ROCK (R)

Singleton Alive is an annual holiday program run in conjunction with Singleton Evangelical Church (SEC). All leaders are volunteers who have formally applied to be a part of the team and have undergone training to ensure a child-safe environment. They have also signed the "Working with Children" check and are in agreement with the Child Protection (Prohibited Employment) Act 1998.

In case of a Medical Emergency:

- I. I authorise the leader in charge of SEC or Singleton Alive to arrange for my child/ren to receive such **first aid, medical or surgical treatment** as the leader may deem necessary at any time during the program. You will be called as soon as possible if your child needs medical attention
- II. I authorise the use of **ambulance** and/or **anaesthetic** by a qualified medical practitioner if in his/her judgement it is necessary
- III. I accept **responsibility for payment of all expenses** associated with such treatment

General Agreement:

- I understand that **photos of my children may be taken by the designated team photographer** and that these photos may be published on the Singleton Alive or SEC social media pages.
- They may also be used in the making of a video clip of Singleton Alive for use in SEC Sunday services or SEC social media pages.
- If you **do not** want your child included in any such photos, please visit the registration desk to fill out the photo-exclusion sheet.

By signing here, you agree to the above & grant permission for your children to participate in the Singleton Alive 2025 program.

Full Name of Parent/Guardian (PLEASE PRINT):

Do you give permission for Singleton Evangelical Church to contact you by email/text regarding current & future Singleton Alive events?

Yes No

Parent/Guardian Signature:

DATE:

Contact Number: