

The Easter Mystery
Thursday 31st March 2016

Child's Name:

Address:

Home Telephone Number:

Date of Birth:..... Age:

Any known allergies or conditions:.....

.....

Emergency contact name:

Emergency contact number:

Parents email address:

I give consent for to take part in The Easter Mystery
at Rayners Lane Baptist Church on Thursday 31st March 2016

Signed: (Parent/Guardian)