



**The 11's to 14's group at St Andrews and  
Townfield Churches Bebington**

**Dear Parent/Guardian**

We are really pleased that your child(ren) come to Pathies or would like to come.

The programme is available at [www.pathies.co.uk](http://www.pathies.co.uk)

If you would like your child(ren) to attend (or carry on attending) please could you fill in the form below giving your consent and return it to us as soon as possible.

**Yours Sincerely**

**Darren Humphryes,  
Youth Minister, St Andrews & Townfield Churches  
Tel: 07511 907029**

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**Please fill in the form in Block Capitals**

Full name of child and age \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Please give details of any medical conditions (e.g. asthma, epilepsy, diabetes, allergies, dietary needs) or disability that may be relevant:

\_\_\_\_\_

\_\_\_\_\_

Telephone number for emergencies: Home: \_\_\_\_\_

Mobile: \_\_\_\_\_

*I give my consent for my child to attend Pathies and consent to any medical treatment that may be necessary in event of an emergency.*

Signed (parent or adult with parental responsibility) \_\_\_\_\_

Name of Parent (Printed) \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_