



PERMISSION NOTE

Full Name of Parent/Guardian (PLEASE PRINT):

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Please note that you are required to complete one form for each **family** (eg if you are the parent of children from one family and the guardian of children from another family, you will be required to fill out this form twice).

Please enter **full** name of child(ren) who you are filling in this form for

Maitland Alive is an annual holiday program run in conjunction with Maitland Evangelical Church (MEC). All leaders are volunteers who have had to formally apply 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 the unlikely event of a medical emergency:

- I authorise the leader in charge of the above mentioned group to arrange for my children 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
- I authorise the use of **ambulance** and/or **anaesthetic** by a qualified medical practitioner if in his/her judgement it is necessary
- I accept **responsibility for payment of all expenses** associated with such treatment

I understand that **photos of my children may be taken by the designated team photographer** and that these photos may be published on the Maitland Alive or MEC social media pages. They may also be used in the making of a video clip of Maitland Alive for use in MEC Sunday services and affiliated churches. If you do not want your child included in any such photos, please visit the rego desk to fill out the photo-exclusion sheet and we will put a sticker/mark on your child's name tag to help us identify them.

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

Parent/Guardian Signature:

Date: