

# BANSTEAD FIVE CHURCHES HOLIDAY FUN WEEK

## b5holidayfunweek@gmail.com

### Church Representatives

**All Saints** – Neil Allison

**Methodist** – Vernon Tucker

**St. Paul's** -- Morna Moore

**St. Ann's** – Louise Hartfield

**URC** – Caroline Burns



Godpod 18

**Monday 30<sup>th</sup> July to Friday 3<sup>rd</sup> August 2018**  
**Registration Day Sunday 18<sup>th</sup> March 2018 see below for details**

Dear Parent/Carer and Teenager,

Banstead Five Churches Holiday Fun Week will take place at The Methodist Church, The Drive, Banstead, SM7 1DA, we have an exciting programme planned this year led by St. Paul's Church.

At 9am Monday – Friday inclusive, the day begins for all Teenage and Adult helpers with morning prayer and any notices given, ensuring all groups have the same good start for the day. The morning activities will take place between 9.30am – 12.30pm. There will be a party with an entertainer on Thursday for Reception - Year 2 children (4-6pm) and a disco for Year 3-7 children (7-9pm) at St. Ann's Church Hall.

Please indicate on the attached form which days and Thursday activities your teenager would be happy to help with. Banstead Five Churches Holiday Fun Week t-shirts with logo will be available to order on page 2 of the application form.

There will be a meeting for all those involved in Banstead Five Churches Holiday Fun Week on **Wednesday 13<sup>th</sup> June 2018** at St. Paul's Church, Warren Road, Banstead, SM7 1LG at 7pm. **Teenagers MUST arrive for a 7.00pm start** as the first half hour of this meeting is specifically for them. **It is imperative that everyone attends.** There may be opportunities for teenagers to take part in either the drama or music group which will perform during the morning service, details of this and practice times will be notified at this meeting.

Our preferred way for you to register for Banstead Five Churches Holiday Fun Week is by on-line registration. There are two stages to the registration process, but before you start you need to request a link. You can do this by joining our closed group on Facebook @ **B5 Holiday Fun Week** or email us at b5holidayfunweek@gmail.com . Once you have this link, you can create an account and register your personal details on-line. Then from **Sunday 18<sup>th</sup> March 1pm until midnight** you can make your choices on-line for this year's Banstead Five Churches Holiday Fun Week complete with your payment (where required) via Pay-Pal.

However, you may use the attached paper version for registration if you prefer. Please return the completed form to **The Open Door Café, Banstead High Street SM7 2NG** on **Sunday 18<sup>th</sup> March** from 1.30pm – 3pm. Application forms must be completed by a Parent/Carer.

***Due to adult/child(teenager) ratio safeguarding requirements application forms will now be processed on a first come first served basis.***

Letters confirming whether your teenager has a place at Banstead Five Churches Holiday Fun Week or not will be sent out by the end of May. Please note that Banstead Five Churches Holiday Fun Week is reliant on volunteers and therefore we may be unable to offer your teenager a place. Please contact your own Church Holiday Fun Week Representative or e-mail us if you require any further information, thank you.

The 2018 Team



# TEENAGE HELPER FORM

(Sch Yr 8 – Age 17 on 30<sup>th</sup> July 2018)

For administration use only

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Complete form (pages 2-4) to be returned on Registration Day at the **The Open Door Café, Banstead High Street on Sunday 18<sup>th</sup> March from 1.30pm – 3pm**

**ALL HIGH-LIGHTED SECTIONS (GREY) OF THIS FORM MUST BE COMPLETED IN FULL BY PARENT/CARER. Please PRINT clearly in black ink**

ALL INFORMATION GIVEN WILL BE TREATED IN STRICTEST CONFIDENCE

## Teenager's Details

Last Name  First name   
*Preferred First name if other than above*

Date of Birth  Age on 30<sup>th</sup> July 2018

Home Address   
  
 Post Code

Parent/Carer(P/C) Full Contact Name

Tel. Number Daytime/Home P/C

Telephone Number Mobile P/C

Email address P/C (if available)

Alternative Emergency Contact Name

Telephone Number Daytime/Home

Telephone Number Mobile

Teenager's Mobile Number - May be used for joint text with P/C number as above. **If not agreed by P/C leave blank.**

Teenager's E-Mail address- May be used for joint e-mail with P/C address as above. **If not agreed by P/C leave blank.**

Church attended on a regular basis (please circle)  None  All Saints'  Methodist  St Ann's  St Paul's  URC  Other

Does your teenager hold a First Aid Qualification?  YES/ NO If YES Expiry Date

Are they Auto Injection (EpiPen/Jext) trained?  YES/ NO

## T-shirt order

Type of Shirt	Size (Please circle relevant size)					Quantity	Cost	Item Total
Adult T Shirt (100% Cotton)	S	M	L	XL	XXL		£7.50	
Adult Polo Shirt (Polycotton)	S	M	L	XL			£15.00	
Please make cheque payable to <b>Banstead Five Churches Fun Week</b> (Please write teenager's surname on reverse if different to surname on cheque)							Total	£

**Payment by cheque preferred.**



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## Health Information – to be completed by Parent/Carer

Family Doctor

Address

Postcode

Telephone Number

### Please answer the following questions in full and to the best of your knowledge

1. Does your teenager suffer from any allergies/illness?  YES/NO (delete as appropriate)

If **yes**, please give details

2. Does your teenager have any dietary requirements?  YES/NO (delete as appropriate)

If **yes**, please give details

3. Does your teenager have special educational needs or require special arrangements to participate at Banstead Five Churches Holiday Fun Week?  YES/NO (delete as appropriate)

*Banstead Five Churches Holiday Fun Week aims to cater for the needs of as many children as possible. To help us in our planning and staffing please indicate below if your teenager has any identified additional needs\* or receives support at school and a Banstead Five Churches Holiday Fun Week leader will contact you to discuss confidentially any additional support which will need to be put in place during Banstead Five Churches Holiday Fun Week.*

*\* The term additional needs relates to Medical Needs, Cognitive Needs, Physical and Sensory Needs, Social Communication Needs (including Autistic Spectrum Disorders) and Behavioural, Social and Emotional Needs.*

If **yes**, please give details

Please give the name/s of family members, carers or any siblings and their school year (where appropriate) attending Fun Week.



# TEENAGE HELPER FORM

(Sch Yr 8 – Age 17 on 30<sup>th</sup> July 2018)

I agree to any medical treatment to be given as considered necessary by the medical authorities if I cannot be contacted. I will complete a Medication Consent Form to accompany my teenager and their medication (if prescribed medication is requiring this during Banstead Five Churches Holiday Fun Week).

I give permission for my teenager [redacted] (first & last name) to take part in Banstead Five Churches Holiday Fun Week activities during the week of, 30<sup>th</sup> July – 3<sup>rd</sup> August 2018.

I understand that as a Teenage Helper at Banstead Five Churches Holiday Fun Week my teenager **will not** be supervised outside of the morning or Thursday session times.

Parent/Carer's Name (printed) [redacted]  
 Signed (Parent/Carer) [redacted] Date [redacted]

## Photographs

During Holiday Fun Week, children may be photographed. Some of these photographs may be used in displays in the Banstead Five Churches, their Church Magazines and some may be used on the Banstead Five Churches website or Facebook page (this is as closed Facebook group).

If you DO NOT want your teenager's photograph taken, please complete **one** of the boxes underneath and sign below.

I do not want my teenager's photograph to be included in any photographs during Banstead Five Churches Holiday Fun Week including group photos to be given out as a memento to your child's group.		(Teenager's first & last names)
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I do not want my teenager's photograph used in any Banstead Five Magazine or on the Banstead Five Churches website or Facebook page but consent to my teenager being included in a group photo, to be given out as a memento to my child's group.		(Teenager's first & last names)
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Parent/Carer's Name (Printed) [redacted]  
 Signed (Parent/Carer) [redacted] Date [redacted]

## Morning Activities

My teenager will be able to be a **Morning Helper** and be available on (please circle)

Monday	Tuesday	Wednesday	Thursday	Friday
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Preferred age group (please circle **one**). We will try to fulfil your request but cannot guarantee this.

Reception	Yr 1	Yr 2	Yr 3	Yr 4	Yr 5	Yr 6	Yr 7
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## Thursday Activities (Your teenager may only help on Thursday if they help in the mornings.)

<b>My teenager will/will not</b>	Be able to help on Thursday (Please delete as appropriate.)
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Party (4-6pm) Rec-Yr2		Disco (7-9pm) Yr3-Yr7	
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