

Activities and Day Visits

|  |  |
| --- | --- |
| **Name of Group** | Wantage Baptist Church Youth Group |
| **Proposed Visit or Activity** | Laser Kombat, Oxford |
| **Date** | Friday 15th September 2017 |
| **Meeting place & time** | Laser Kombat, 3a/3b Grenoble Road, Ozone Leisure Park, Oxford, OX4 4XP at 6:15pm |
| **Collection place and time** | Laser Kombat, 3a/3b Grenoble Road, Ozone Leisure Park, Oxford, OX4 4XP at 7:30pm |

✂

**Reply Slip One Form Per Person**

|  |  |
| --- | --- |
| **Full name of child/young person** |  |
| **Address** |
| **Telephone No. For emergencies** |  |
| **Please give details of any medical conditions e.g. asthma, epilepsy, diabetes, allergies, dietary needs or disabilities that may be affected by this activity** |  |

I have read the above information and I give permission for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to take part in this activity.

By signing this form, I also acknowledge that Wantage Baptist Church is not necessarily responsible for any injury that my child may sustain while playing Laser Kombat.

Health and safety is a top priority for us and we will ensure that all safety precautions are fully conveyed to every child. Adult helpers will also be supervising the game to minimise risk.

|  |  |
| --- | --- |
| **Transport is required to/from Laser Kombat for my child** | Yes NoPut X by the answer applicable |

|  |  |
| --- | --- |
| **I give my consent to any medical treatment that may be necessary in event of an emergency.** |  |
| **I enclose cash to the sum of…(£9 per player)** | £ 9.00 |
| **Signature of Parent/Guardian**  |  |
| **Date** |  |