



Logos Registration Form

Child's details:

Name: _____

Date of birth: _____ Male / Female

Address: _____

Phone number: (H) _____ (M) _____

School: _____ Year at school: _____

Parent/Guardian details

Name: _____

Relation to Child _____

Phone number: (H) _____

(M) _____

(W) _____

*Please mark with a * the most appropriate **emergency** contact number*

Email _____

I am happy to receive notifications of upcoming events by email or sms

Health Information

Emergency contact (if parent/guardian can not be reached): _____
Phone number _____

Family Doctor: _____

Suburb: _____ Phone: _____

Medicare No: _____ Reference No: _____ Expiry date: _____

Health insurance: _____ Membership No: _____ Ambulance cover?: Y/N

Date of Last Tetanus booster: _____

If any of the following questions apply are marked Y, please give details in the space provided below:

- Does your child have any allergies? (food, drug, environmental) Y/N
- Is your child on a special diet? Y/N
- Does your child take any medication? Y/N (please outline dosage, purpose & times below)
- To prevent possible embarrassment, does your child wet the bed or sleep walk? Y/N
- Does your child have a disability (physical, mental, learning, emotional)? Y/N
- Can your child swim: Y/N How many metres? _
- Does your child have behavioural problems? Y/N

Please detail any operations or serious illness.

If your child is restricted from any activity, please note the restriction and specify the condition involved:

Is anyone legally restricted from seeing this child? Y/N If so, who: _____

Logos Code of Conduct for Parents/Guardians:

- Recognising and respecting the voluntary commitment of the Logos team, parents/guardians must:
 - Ensure their youths arrive no earlier than 7:00pm, and no later than 7:15pm.
 - Collect their own youths in person, or must notify Logos leaders of alternative arrangements at time of drop-off (youths will not be allowed to walk home under any circumstances, and leaders cannot drive youths home).
 - Collect their youths at 9:30pm sharp.
 - Come to the main entrance (carpark side) to collect children in person.
 - Ensure that their youths adhere to the Logos Code of Conduct for Youths.
 - Pick up their children early if contacted regarding disciplinary issues.
- In the case of a medical emergency, I hereby give permission to the Doctor chosen by the church authorities or other persons supervising or administering the youth activity, to secure proper treatment for and/or order hospitalisation, injection, anaesthetic or surgery for my child as named. I understand that every effort will be made to contact me prior to instituting such procedures.
- I give permission for photo/video of my child to be taken that may be used when advertising the group Y/N

(Parent to sign)

I have read and agree to the Logos Code of Conduct for Parents/Guardians

_____ Date _____

Logos Code of Conduct for Youths:

- Youths must be respectful to **leaders** by:
 - Cooperating with instructions.
 - Speaking respectfully to leaders.
- Youths must be respectful to **each other** by:
 - Not bullying, gossiping about, or excluding others.
 - Not swearing.
 - Participating enthusiastically in all group activities (where possible).
 - Speaking and acting kindly to others.
- Youths must be respectful of the **law**:
 - No alcohol, cigarettes, or illicit drugs to be brought on the premises.
 - No-one is to come to Logos under the influence of alcohol or illicit drugs.

(Youth to sign)

I have read and agree to the Logos Code of Conduct for Youth

_____ Date _____

The leadership team of Logos will treat the information contained in this form confidentially. This information may be shared with a third party when it concerns medical health or care of the individuals listed. If you wish to access this information or have any queries in relation to the manner in which we handle your personal information, please do not hesitate to contact us.