

Medical Information

Please record below any health issues/medical information the club would need to be aware of such as Asthma, Nut allergies etc

Name _____

Health Issues

From time to time there will be photos taken within the club. These will be used for or website or local press. We need your permission to take any photos of your child. Please sign below to give your consent.

Signed _____ ***Date*** _____

Check our website for up-to-date information on club activities and to view any photos taken on behalf of the club.

www.creggancamogie.co.uk