

**GET READY FOR THE SHINFIELD
SUPERHEROES CLUB!**



**A SUPER SIZED COMBINATION OF GAMES,
DRAMA, CRAFTS, MUSIC AND JOKES IS ZOOMING
TOWARDS ALL PRIMARY SCHOOL AGED CHILDREN FROM YEAR R TO YEAR SIX THIS
SUMMER HALF TERM AT SHINFIELD SUPERHEROES CLUB**

**THE CLUB TAKES PLACE ON THE MORNINGS OF 30, 31ST MAY, 1ST, 3RD JUNE FROM 9.15AM-
12.15PM (EXCEPT FOR THE FINAL SESSION ON SUNDAY 3 JUNE WHICH IS 10AM -
11.15AM).**

**ALL THE ACTION TAKES PLACE AT SHINFIELD BAPTIST CHURCH BUILDING ON FAIRMEAD RD.
THROUGH THE ACTIVITIES CHILDREN AT THE CLUB HAVE A CHANCE TO DISCOVER ABOUT
JESUS, THE ULTIMATE SUPERHERO, ENJOYING THE OPPORTUNITY TO ENCOUNTER AND
MAKE FRIENDS WITH HIM.**

**SHINFIELD SUPERHEROES CLUB IS LED BY A BY TEAM FROM ST.MARY'S, ST.MICHAEL'S
AND SHINFIELD BAPTIST CHURCHES. THIS IS THE SAME TEAM THAT ORGANISED THE
POPULAR 'LANDLUBBERS' AND 'KNIGHTS OF THE KING' HOLIDAY CLUBS IN 2016, 2017.**

WE LOOK FORWARD TO YOUR CHILD BEING ABLE TO JOIN 'SHINFIELD SUPERHEROES'

**SHINFIELD SUPERHEROES HAS LIMITED PLACES WHICH WILL BE ALLOCATED ON A FIRST COME,
FIRST SERVED BASIS. IF YOU WOULD LIKE YOUR CHILD TO HAVE A PLACE IN THE CLUB PLEASE BOOK
BY COMPLETING THIS FORM AND SUBMITTING IT EITHER BY POST OR EMAIL. THE CHARGE FOR
THE CLUB IS £2 PER CHILD, PER SESSION PAYABLE ON THE DAY. BOOKING FORMS SHOULD BE
SUBMITTED BY 23RD MAY.**



To reserve a place this form can be emailed to office@loddonreach.org.uk
(electronic copies of this form can be found at <http://shinfieldbaptist.org.uk/>)

Alternatively you can send a signed, paper copy to: Mrs Karen Eaves, Benefice Administrator, Benefice Office, St Mary's Church Hall, Church Lane, Shinfield, RG2 9BY.

Full name of child/ren.....

Date/s of Birth.....School Year/s.....

Address.....

.....Postcode.....

Email.....

Name of Parent/Guardian with legal responsibility for child
.....

Home Tel no..... Mobile no.....

1st emergency contact (if as above please state 'as above').....

Relationship to child.....

Contact tel no.....

2nd emergency contact

Relationship to child.....

Contact tel no.....

Name of person collecting child from 'Shinfield Superheroes,' (if you would like your child to make their journey home from the club unaccompanied please indicate this below understanding that you are fully responsible for your child's welfare on their journey home if you do so).

.....

G.P. name.....

Surgery address

Contact no.

Details of any known allergies/ medical conditions/disabilities (please add any additional information that you think it would be helpful for us to be aware of).

In the unlikely event of illness or accident I give permission for any necessary medical treatment to be given by the nominated first-aider. In an emergency if I cannot be contacted I give permission for my child to receive hospital treatment, including anaesthetic. I understand every effort will be made to contact me as soon as possible.

I confirm these details are correct to the best of my knowledge.

Signed

Date

Please tick the box if you are happy for Shinfield Baptist Church and St.Mary's church (on behalf of the Loddon Reach Benefice) to store and use your details given in this form for the sole purpose of contacting you about other relevant children, youth and family events and activities organised by St.Mary's, St.Michael's and Shinfield Baptist Churches over this and the coming academic year. If you agree your details will not be passed on to any third parties and will be removed from our databases by July 2019 unless you request otherwise.

