



# MISSION RESCUE

## **Holiday Club**

Weds 22<sup>nd</sup> - Fri 24<sup>th</sup> July 2026 (9.30-12.00)

St. Mary's Church, Boston Spa

for school children from Reception upwards



**MISSION RESCUE is a three-day children's holiday club (three weekday morning sessions and a closing Sunday service):**

**Wednesday 22<sup>nd</sup> - Friday 24<sup>th</sup> July 9.30-12.00**  
**Sunday 26<sup>th</sup> July 10am Closing Service**

During the week, we will have great fun finding out about MISSION RESCUE through games, stories, crafts, songs and having lots of fun.

Dress code: Our theme this year is SPIES so if you want to dress up, think spies - or just come in something comfortable and practical!

There are strictly limited numbers to ensure the enjoyment and safety of all the young people who attend, so please fully complete our registration form opposite (one per child and both sides please) then detach and send to St. Mary's Church, Boston Spa and complete one for each child attending. Places will be filled really quickly so get your registration back as soon as possible but no later than **Friday 10th July please.**

DONATIONS: This is a self-funding holiday club paid for by generous donations made by parents, parishioners, carers and families of the young people who attend. We do not get any additional funding from the Church of England, Government, Education Department or Council and ALL the 'person power' is given free of charge!

We are very grateful to receive a suggested **£2 per child** per morning donation towards the cost of Holiday Club. And please don't forget to sign the Gift Aid section so that we can claim some money back from the tax man!

We must stress that those young people whose circumstances mean that they are unable to make a donation are still most welcome to attend the holiday club.

**PLEASE RETAIN THIS HALF OF THE FORM AS IT CONTAINS THE INFORMATION YOU NEED!**



# Registration and Consent Form

Please complete this form and detach it to book a place for your child.

Please use a separate form for each child.

Please **see overleaf** for rest of form and when fully completed, send to the Parish Office, St.Mary's Church, High St, Boston Spa, LS23 6DR

**Please complete by Friday 10th July to ensure your place**

My child will attend on:

WED: .....	THUR: .....	FRI: .....
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<b>Child's Full Name:</b>		<b>Child's Date of Birth:</b>
<b>Name of School:</b>		<b>Sex: M / F</b>
<b>Parent/guardian's full name:</b>		
<b>Address:</b> .....  ..... <b>Post Code:</b> .....		
<b>Email Address:</b> .....		
<b>Contact Phone Number(s)</b>	Daytime: Evening:	
<b>Emergency contact name and number during Holiday Club:</b>		
<b>GP's Name and Address:</b> <b>GP's Phone Number:</b>		
Please provide details of any medical conditions / allergies (add a separate sheet if needed)		

I do not wish these details to be held on the church database

I give permission for my child's photo to be taken during the club (to be used for church purposes only, including church magazine and website)

## CONTINUATION

I confirm that the details overleaf are complete and correct to the best of my knowledge. In the unlikely event of illness or accident, I give permission for any appropriate first aid to be given by the nominated first-aider. In an emergency, and if I cannot be contacted, I am willing for my child to be given hospital treatment, including anaesthetic if necessary. I understand that every effort will be made to contact me as soon as possible.

Parent/guardian signature: ..... Date: .....

We are very grateful to receive a suggested £2 per child per morning donation towards the cost of Holiday Club. This can be paid before the holiday club as well as on the day (no one is turned away from Holiday Club if a donation is not possible this year.)

Please would you take this opportunity to pay by cheque (payable to St Mary's Church) or cash, and if possible to 'gift aid' the donation (for every £10 donation gift aided we can claim an extra £2.50).

Please complete below:

Please tick one: Cash ..... Cheque.....

Gift Aid declaration – for a single donation to St Mary's Church.

Please treat the enclosed gift of (please complete): £ ..... as a Gift Aid donation.

I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for the current tax year (6 April to 5 April) that is at least equal to the amount of tax that all the charities and Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for the current tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I have given. As a UK taxpayer, I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference

Title ..... First name or initial(s) ..... Surname.....

Full Home address (if different to overleaf)

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.....Postcode .....

Date ..... Signature .....