Holy Trinity Church: Satellites 2024 Youth Registration Form

Event Details

Satellites is a summer event/camp for young people, run by Youthscape. It's a five-day gathering, designed to inspire teenagers to live with God at the centre of their lives for the other 360 days of the year. There will be morning and evening worship & teaching sessions which will be mandatory for all youth to attend, afternoon activities and lots of food & fun! We will be taking a group of youth and are planning to camp with youth from other Guernsey churches.

For more information on the event, you can visit their website. Please don't book on the website though!! All booking will be done through Trinity Church: https://www.youthscape.co.uk/satellites/home

Please note:

- **Abby is on maternity leave from mid-December to mid-June**. Please speak to Cynthia Wilkinson (Church Manager, cynthia@trinitygsy.org) if you have any questions.
- We will not be providing travel insurance. If you would like your young person to have this, please organise it yourselves.

Age range:	The event is for those who have just finished school years 7-13.
Venue:	Bath & West Showground
Dates:	2-7th August 2024 (the website says it finishes on 6 th - the last main session is in the evening on 6 th and everyone leaves on 7 th)
Travel &	We will fly to Bristol and then go by coach or minibus to the Showground.
camping:	2/8/23 depart Guernsey 10:50 arrive Bristol 11:45
	7/8/23 depart Bristol 15:05 arrive Guernsey 16:10
	We already have some tents which we will take with us. Depending on how many youth
	sign up, we may need more. However we won't know until nearer the time! Details on
	tents and a packing list will be given to parents after Easter.
Cost:	The cost for each young person covering travel to England, the event ticket & catering will be in the region of £400+.
	However, we are charging the young people either £300 (Early Bird Option) or £320
	We have received a discount from Satellites and each church will be fundraising to cover this reduction in price. If you can afford to pay the full amount, please feel free to do so!
	We are aware that for some parents, paying the amount we are charging is not possible.
	If you are unable to afford this, please speak to Cynthia Wilkinson. We don't want cost
	to be the reason young people can't go!
	Payment Plan
	Early Bird - £100 deposit by 1 Feb, £200 by 30 June
	Regular - £120 deposit by 23 May, £200 by 30 June
	The final payment deadline is 30 June.
Bank details:	Holy Trinity Church Mission Partners
	27027760
	30-93-73
	Lloyds Bank
	Ref: Satellites[young persons 1 st name & surname]

Please tear off this piece of paper and keep it for the info!

Holy Trinity Church: Satellites 2024 Youth Registration Form

This form is to be signed by a parent or guardian of the young person attending. If the young person is 18 at the time of signing up, they can sign it themselves.

Young Person's Information					
Legal name:		Date of birth:			
Preferred name:		Age:			
Birth gender:	MALE FEMALE OTHER	Known as gender:	MALE FEMALE OTHER		
Email address:		School:			
Phone number:		School year just finished in Aug 2024:			
Address:					
Any other relevant information:					

	Parent / Guardi	ian Information	
Name:		Relationship to young	
		person:	
Email address:		Phone number:	
Address:			
Any other relevant information:			

Medical Information	
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behavioural needs we shou	ve any medical / mental health / educational / ld be aware of? letails & how these are managed:	′	YES	NO
Does your young person ha	ve any allergies? cluding severity & how these are managed:		YES	NO
II TES piedse give details ilic	idding severity & now these are managed.			
If YES please give details inc	ve any dietary requirements? cluding severity & how these are managed:		YES	NO NO
taken, how they should be s which youth will need to ca administer it according to p Please leave medication wit initially dropped off.	cluding what medication, how they are taken, we stored etc. Please note all medication (except or with them) will be looked after by a leader arent/guardian instructions, including antihist th your young persons name on with a leader	epi-pens who will amines. when	11.5	NO
Doctors name, Surgery & address:		Doctors surgery phone:		
leader to sign on my behalf authorities, if the delay requ by the doctor concerned, in rays, medical, surgical, and	accident while at the event, I authorise a responsive term or consent required by the hold to obtain my own signature is deemed in terms of administering medical intervention sanaesthetic treatment.	nospital nadvisable	YES	NO
Any other relevant information:				

Phone number: Relationship to young person: Relationship to young person: Relationship to young person: Relationship to young person: Phone number:		are still requi	If young person will be 18 red. Please give two conta		
Contact 2 Name: Relationship to young person: Photo / Video Consent Do you give consent for photos and videos to be taken of your young person, named on this registration form, that would be used for the purpose of promoting Trinity Youth, such as printed publications, promotional / highlights video, church websites and on social media platforms? This could also include photos/videos taken by other Guernsey churches will be camping with. Any other relevant information:	Con	tact 1	Name:		
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	platforms? This could also i				
Camping	Any other relevant informa	tion:			
Camping			Comping		
Who would your young person like	Who would your young per	rson like	Camping		
to share a tent with? We cannot guarantee we'll be able to meet all requests but will try our best!	to share a tent with? We ca guarantee we'll be able to r	annot meet all			
Any other relevant information or comments?		tion or			
	Any other relevant informa comments?				

Payment

(You will receive confirmation of your	payment via email ASAP	after paying)
Have you paid for your ticket yet?	YES	NO
How have you/will you pay for your ticket?	IN FULL	IN INSTALLMENTS

	Decla	ration	
Trinity Church of any change	on on this form is correct. I un es detailed on this form. I con ve understood and give my co	sent for the information abov	ve be stored in accordance
A hand-written signature is	required.		
Signature:		Relationship to young	
		person:	
Print name:		Date:	

Please return this form to cynthia@trinitygsy.org or to the Church Office, Holy Trinity Church, Trinity Square, St Peter Port, Guernsey, GY1 1LP

The data collected in on this form will be processed in accordance with relevant GDPR regulations. We will only collect data that is required and ensure safeguards are in place to store It safely and securely. We will only hold data for the required amount of time, after which all records will be deleted/destroyed.