

Daniel Matthew Ecclesiastical College Ecclesiastical Educational & Workshops

Thank you for booking with us in one of our ecclesiastical educational & workshop.

Please complete this form and return to admission@dmecs.org before the workshop takes place so that we can meet all your needs when you are with us at the event.

Please tick one: I am over 18 I am under 18 Please provide date of event; _____

If you are under 18 years of age this form MUST also be signed by a parent or guardian and emailed to us or brought with you on the day. Without a signed form you will not be able to take part in the workshop. If you are 18 or over you MUST bring some proof of age to take part.

Personal details

Full name _____ Date of birth _____

Phone number _____ Email _____

Emergency contact

Please provide details of an adult we can contact if there is an emergency.

Full name _____ Mobile number _____

Alternative phone number _____

Email _____ Relationship to you _____

If you answer yes to any of the following questions please include further detail in the space provided:

Do you have any medical conditions, allergies and/or require medication? Y/N

Do you have additional needs? Y/N

Is there anything else we need to know about you? Y/N

Consent

I understand the workshop will:

- Use technical and professional equipment supervised by Gallery staff and artists.
- Involve working alongside others aged 15–19.
- Include an unsupervised lunch break.

(18 and over)

Participant [print name]

Signature

(Participants under 18)

Parent/Guardian [print name]

Signature

Photography consent

I consent and authorise the use and reproduction by the Daniel Matthew Ecclesiastical College, its subsidiaries and any person or corporation working with the permission of the Daniel Matthew Ecclesiastical College, any photograph you have taken of me on the date below, for any purpose, and without compensation to me.

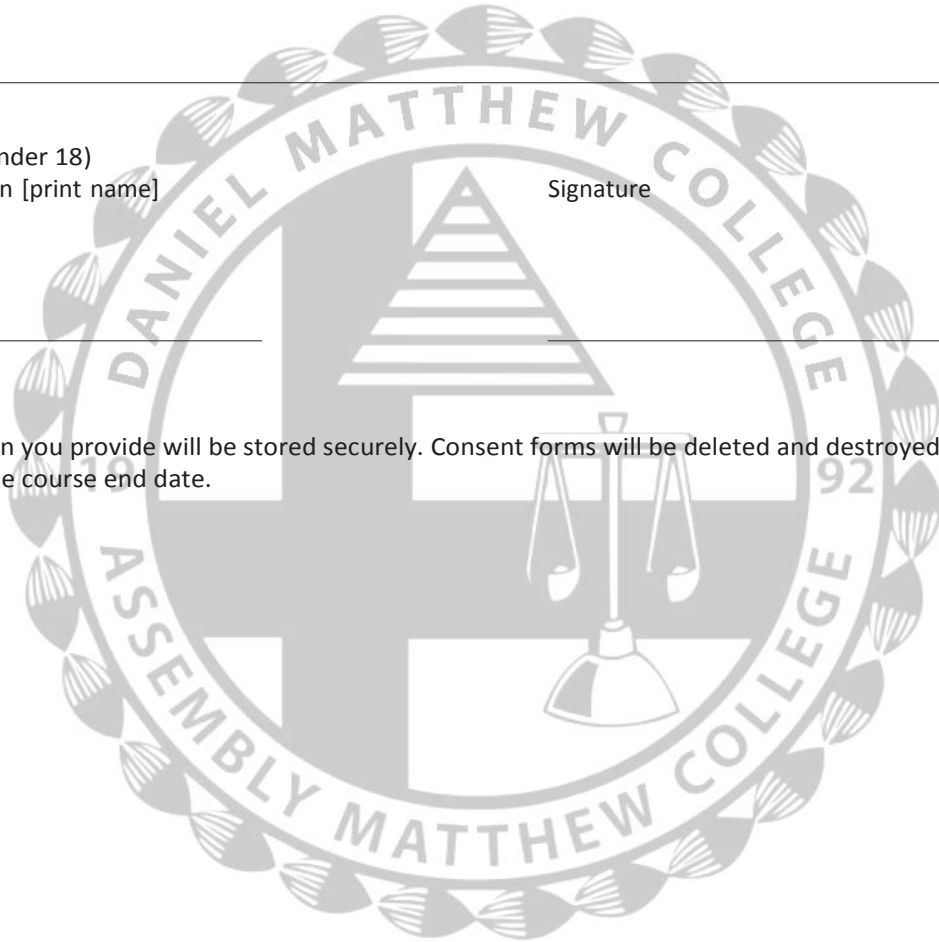
All photographs (film, paper or digital) are and will remain the property of the Daniel Matthew Ecclesiastical College. (18 and over)

Participant signature

(Participants under 18)
Parent/Guardian [print name]

Signature

The information you provide will be stored securely. Consent forms will be deleted and destroyed within one week of the course end date.



Please email, bring these form to:

Daniel Matthew Ecclesiastical College
Attn.; Admission Department
1 (636) 224-6642 (main)
Email: admission@dmecs.org