

JAM PACKED SUMMER 2015

Registration & consent form

What is your name?.....

What do you like to be called?.....

How old are you?.....

What is your date of birth?.....

What is your address?.....

.....

Telephone number.....

**E-mail
address.....**

Who do we contact in an emergency?

1. Name.....

Contact number.....

2. Name.....

Contact number.....

Which school do you attend?.....

What activities do you like doing?.....

.....

.....

What activities don't you like?.....

.....

.....

Do you need one – to – one support for indoor activities?.....

.....

Do you have any difficult behaviour such as hitting, spitting, biting or running

off?.....

What is the best way to deal with this behaviour?.....

.....

.....

Is there anything else we need to know?.....

.....

.....

Personal Care Needs

Do you need reminding to go to the toilet?.....

Do you need assistance going to the toilet?.....

If yes, please describe the type of assistance you need.....

.....

.....

Do you have any food allergies?.....

Do you need your own support worker or PA?.....

Do you need or use any special equipment?.....

.....

Do you have any other health issues we need to know about?.....

.....

.....

Communication

Is there anything we need to know about how you prefer to communicate?.....

.....

Do you walk, use aids or use a wheelchair?.....

SPORTS ZONE/COUGARS/SUMMER SCHEME ACTIVITY SESSIONS

Consent form

Name	
Address	
Date of birth	
Disability	
Ethnicity	
Parent/carer signature	

Any other information

--

Please return to: Debbie Greenwood, Calderdale Sports Development, The Shay Stadium, Shaw Hill, Halifax, HX1 2YT.

debbie.greenwood@calderdale.gov.uk



Photography Consent Form

Child/Young Person (age under 18)



Child's Name:	
Your name:	
Address:	
Tel No:	

We would like to take photographs which include your child for our promotional purposes.

The photographs will go on our leaflets, booklets and display panels; all these may also be placed on our web site on the Internet. Please be aware that our website can be seen throughout the world, and not just in the United Kingdom where UK law applies.

To comply with the Data Protection Act 1998 we need your permission before we take any photographs which include your child.

- May we take photographs which include your child for our promotional purposes? Yes No
- May we use these in our leaflets, booklets and on display panels? Yes No
- May we use these on our web site? Yes No
- May we include your child's name and some details with your photograph? Yes No

We will not include any details such as your e-mail address, postal address, telephone or fax number with the photograph.

By signing this form you allow us to use these photographs on new leaflets, booklets and display panels for two years from the date on the form.

Note that leaflets, booklets and display panels may stay in use longer than this.

I have read and understand this form.

Your signature: _____

Date: _____

This section for Council use only	
Telephone:	
Fax:	
Email:	
Name of commissioning officer:	
Name of photographer:	
Location where photographs are to be taken:	

Photography Consent Form

Adult (age 18+)



Your name:	
Address:	
Tel No:	

We would like to take photographs which include you for our promotional purposes.

The photographs will go on our leaflets, booklets and display panels; all these may also be placed on our web site on the Internet. Please be aware that our website can be seen throughout the world, and not just in the United Kingdom where UK law applies.

To comply with the Data Protection Act 1998 we need your permission before we take any photographs which include you.

May we take photographs which include you for our promotional purposes?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
May we use these in our leaflets, booklets and on display panels?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
May we use these on our web site?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
May we include your name and some details with your photograph?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

We will not include any details such as your e-mail address, postal address, telephone or fax number with the photograph.

By signing this form you allow us to use these photographs on new leaflets, booklets and display panels for two years from the date on the form.

Note that leaflets, booklets and display panels may stay in use longer than this.

I have read and understand this form.

Your signature:

Date:

This section for Council use only	
Telephone:	
Fax:	
Email:	
Name of commissioning officer:	
Name of photographer:	
Location where photographs are to be taken:	