Day events and activities –

information and consent

**Leaders: complete this page and give to parents and carers to keep**

|  |  |  |  |
| --- | --- | --- | --- |
| Please return this form to | Unit Leader please add your name      |  by | Jan 2025 |

**Name of event(s) or activity(ies)**

You can use this form for multiple activities

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| Girlguiding Surrey East County's Musigals 2025 |

**Details for the event(s), including activity(ies)**

Include location(s), start/end date(s) and time(s), travel and transport information, cost(s), types of activity(ies) and if any special clothing or equipment is needed.

|  |
| --- |
| Location - The Leatherhead Theatre, 7 Church Street, Leatherhead, KT22 8DNShow date - Saturday 29 March 2025 from 9am to 10pmRehearsal location - Colman Redland Centre, Reigate, RG2 0NARehearsal dates - Rehearsals on 19 Jan, 9 Feb and 23 March. Approx 1pm - 5pmTransport - own transport to and from rehearshals/showCost - £30 per child (non refundable)\* includes the cost of hiring rehearsal halls, a commemorative badge, Musigals T-shirt, a programme and a light meal on the Show day.\*\*\*IMPORTANT\*\*\*We are going to film the show and take photos during rehearsal. Please indicate whether or not you are happy for photographs/videos to be taken of your daughter and used in national and local Girlguiding publicity, communications, publications or digital channels (eg website, social media) YES / NOGirls will need to wear make-up/facepaint for the dress rehearsal and the show. Are you happy for your daughter to have this? YES / NOIf No and your daughter has allergies, please supply your own make-up/face paint, as appropriate, lipstick will need to be a bright red shade.PLEASE ENSURE ALL ITEMS OF CLOTHING, COSTUMES AND PROPS ARE CLEARLY NAMED WITH YOUR DAUGHTER'S NAME AND UNIT.  |

[x]  **This is a large-scale event** (where over 100 participants are present)

Please tell your unit leader if you **DO NOT** wish photos or videos of your child to be taken at this event.

As far as possible the event organiser will make sure that your child doesn’t appear in any images, but this can’t be guaranteed.

**Parents and carers: complete and return this page**

You can fill it in and return it electronically.

|  |  |
| --- | --- |
| Participant’s full name  |       |
| Age at start of event |       |
| If the event includes water activities, is the participant confident in this type of water?  | Yes [ ]  No [ ]  |
| If the event includes water activities, can the participant swim 50 metres? | Yes [ ]  No [ ]  |
| Does the participant have any illnesses, disabilities, pre-existing conditions, allergies or medications that are relevant to the activity or event? Is there anything we can do to help make the activity or event accessible for the participant (for example, dietary requirements, prayer space)? |
|       |

**Note:** There will always be at least one person at every unit meeting, activity or event with a valid first aid qualification. If you have any questions or concerns about this, please speak to the unit leader. Please label any medication with your child’s name and provide clear instructions for its use. If applicable, ensure that a spare, clearly labelled inhaler or adrenaline auto-injector is brought to the event to be held by the first aider.

**Emergency contacts**

Please give details of two people who will always be contactable during the event/activity. Think about phone signal and their distance from the event/activity location.

**Emergency contact 1 Emergency contact 2**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |       | Name |       |
| Phone number(s) |       | Phone number(s) |       |
| Address |       | Address |       |
| How do they know the participant? |       | How do they know the participant? |       |

**Consent**

|  |  |  |
| --- | --- | --- |
| I give permission for my child to take part in |       | (event/activity). |

I give permission for the medication listed on this form to be administered (if applicable).

|  |  |  |  |
| --- | --- | --- | --- |
| Parent/carer\* name |       | Date |       |

\*Where the term parent/carer is used, this refers to the adult that has legal responsibility for this child.

**What will you do with my data?**

It’s simple. We need the information that you share with us to run our exciting activities and to satisfy our legal responsibilities. We’ll keep it safe for as long as your child is an active member.

We promise we’ll only share your information if:

* you ask us to
* the law requires us
* in order to comply with our policies so your child can enjoy an activity safely
* it’s in the public interest

Don’t worry – we’ll never sell your data or share it for any other reason.

Girlguiding is the registered data controller\* for all our members’ personal information, both in the UK and around the world.

Want to find out more about how we use your information – and your rights?

Visit [www.girlguiding.org.uk/privacy-notice/](http://www.girlguiding.org.uk/privacy-notice/)

\*The organisation that manages and looks after your data