ACTIVITY REGISTRATION FORM

We are requesting the following information in order to:
Ensure that all participants are as safe as possible. Provide you with further information on opportunities available. Ensure that the activities are open to all the community.

ACTIVITY DETAILS

ACTIVITY:		DATE:	

PARTICIPANT DETAILS

NAME:		AGE:		SEX:	MALE	FEMALE
ADDRESS: POSTCODE: Email:						
TEL NO:		DATE OF BIRTH:				
SCHOOL:						
CLUB:						
NAME OF PARENT/GUARDIAN/CARER:		If applicable KIRKLEES PASSPORT NO.				
EMERGENCY CONTACT NUMBER OF PARENT/GUARDIAN/CARER:						
WHO IS AUTHORISED TO COLLECT YOUR CHILD FROM THE ACTIVITY SESSION: **NB Please note the session finishing time as from the end of the session you will be responsible for your child's welfare.**						
ARE THERE ANY MEDICAL CONDITIONS THAT THE COACH SHOULD BE AWARE OF:						

ETHNICITY (PLEASE CIRCLE)

WHITE	ASIAN	OTHER
BLACK	MIXED	

DISABILITY

DO YOU CONSIDER THE PARTICIPANT TO HAVE A DISABILITY	YES	NO
IF YES, PLEASE STATE THE NATURE OF THE DISABILITY		

I, the parent/guardian of the above mentioned child, have been fully informed of the above activity and have not withheld any relevant information. I agree to my child's involvement in the session.

SIGNATURE OF PARENT/GUARDIAN……

WHERE DID YOU HERE ABOUT THIS ACTIVITY? ----------
DO YOU WISH TO RECEIVE DETAILS OF ACTIVITIES IN THE FUTURE? YES NO

DO WE HAVE PERMISSION TO INCLUDE THE PARTICIPANT IN APPROPRIATE INDIVIDUAL OR GROUP PHOTOGRAPHS OF THE ACTIVITY SESSION AND ACKNOWLEDGE THAT SUCH PHOTOGRAPHS WILL BE USED IN ANY PROMOTIONAL CAMPAIGN OR REPORT TO BE DEVELOPED BY KIRKLEES CULTURE AND LEISURE SERVICES TO BE USED FOR ANY FURTHER PROMTIONAL PURPOSES, SUCH AS BROCHURES, LEAFLETS , INTERNET, POSTERS, VIDEO, ADVERTISING CAMPAIGNS AND NEWSPAPERS.

I agree / disagree for my child's photo to be used as stated above

Signature of parent or guardian

I the participant agree / disagree for my photo to be used as stated above
signature of participant

In the past 4 weeks, <u>not counting any PE lessons,</u> on how many days have you done 60 minutes sport and recreational physical activity when the effort was usually enough to raise your breathing rate? Include activities such as brisk walking and cycling.
Days in the last 4 weeks ……

PLEASE ENSURE THE PARTICIPANT IS WEARING SUITABLE CLOTHING, AND THAT THEY HAVE ADEQUATE/APPROPRIATE REFRESHMENTS FOR THE DURATION/NATURE OF THE ACTIVITY.
THANKYOU FOR YOUR CO-OPERATION IN COMPLETING AND RETURNING THIS FORM

Data Protection Act 1998: The information you provide to Kirklees Metropolitan Council is necessary for project management, development and audit and will be used for those purposes only. Kirklees Culture and Leisure services may share it with other Council Service and Partner Agencies where this is necessary for and consistent with the stated purposes. For the purpose for the Act the contact id Data Protection Officer, 8 Old Leeds Road, Huddersfield, HD1 1SF