

This all inclusive form will be used for your child's medical and contact information for all sessions, events and trips that SAYYES organise.

<b>Member's Information</b>		
Name:		
Date of Birth:	School:	Male / Female
Address:		
		Postcode:
Member's Mobile Phone Number:		

<b>Parent / Carer Information</b>		
Name:		
Address (if different from above):		
		Postcode:
Phone Numbers:		
Email Address:		

<b>Medical Information</b>	
Doctor's Name and Address:	
Phone Number:	Postcode:
Disabilities, Allergies, Medical Conditions including any Medication.	
	Date of most recent Tetanus Injection
Special Dietary Requirements:	

I give permission for my son/daughter to take part in this session and any trips or events and I understand that I will be suitably informed of the nature of the activities that will be undertaken and the travel arrangements in regards to trips and events.

I understand that the leaders and those organising these sessions will take all reasonable care in looking after my son/daughter but they cannot necessarily be held responsible for any loss or damage to personal property during, or as a result of, the session, event or trip.

In an emergency, if I cannot be contacted despite all reasonable attempts to do so by the leaders and organisers of the session, I give permission for my son / daughter to undergo emergency medical / dental treatment, including the use of anaesthetics, as considered necessary by the medical authorities, having taken into account the previously mentioned medical details.

I give permission for The SAYYES Youth Project to process the personal data given on this form for use in relation to my child taking part in this session. All information is kept in line with current data protection legislation.

I understand that videos and photographs of young people attending sessions may be taken and attendance at the session signifies agreement that these may appear in future publicity or other materials produced for SAYYES Youth Project.

Please tick this box if videos / photographs may not be used

I understand that if my son/daughter grossly misbehaves at The Youth Club then the management may forbid them from further participation. I agree to pay for deliberate damage to property caused by my son/daughter.

Signature of Adult with Parental Responsibility:

We have some simple rules which were developed by our own members to keep the youth club a safe and fun environment, where we show respect for one another, the leaders, building and equipment.

I agree to the following rules:

**No swearing   No fighting   No disrespect   No photos/videos.**

If I break one of the rules I agree that it might be necessary to take some 'time out' from the club.

Signature of Member:



sayYES will only use your contact information for the purpose of registering and communicating with you regarding your child's membership and to provide you with information about us and our programmes.

sayYES will not disclose or share any details of name, address, medical or contact details with any third-party other than to the relevant local or national government agency should it be specifically requested.

- sayYES only use your personal data for the purpose for which you provided it.
- You can always get in touch to ask sayYES what personal data sayYES holds and to correct and update your data if anything changes.

Please let sayYES know if you have a specific request regarding the way we contact you.