***Please note that it is the responsibility of parents/carer to provide up to date contact and emergency contact details to the Machan Trust as soon as any changes occur.***



**16+**

**CONSENT**

**FORM**

The Machan Trust

2 Marshall Street

Larkhall

ML9 2HD

Registered Scottish Charity No. SC049358

***Please complete all three pages of this form***

Name Enter name here Date of Birth Enter D.O.B. here

Address Enter address here

Post Code Enter postcode here

Home Phone No. Enter number here Mobile No. Enter number here

Email address Enter email address here

Do you have any allergies, medical requirements? Choose yes or no

If Yes, please give details:

Click or tap here to enter text.

Do you have any additional support needs? Choose yes or no

If Yes, please give details

Click or tap here to enter text.

Any other relevant information we need to know

Click or tap here to enter text.

Cont.

EMERGENCY CONTACT DETAILS

Name Enter name here Relationship Enter relationship here

Address Enter Address here

Post Code Enter postcode here.

Home Phone No. Enter phone number here Mobile No. Enter phone number here

I give consent for my photograph to be taken and video footage to be used for The Machan Trust (Website, Social Media and Funding materials etc)

PHOTOGRAPH Choose yes or no VIDEO FOOTAGE Choose yes or no

Any valuable items brought to a group are done so at your own risk, and we do not accept any responsibility for the loss of or damage of items.

Please check the box to show that you have accepted these terms and conditions [ ]

If the above arrangements change, please contact the Machan Trust on: 01698 305674.

Please sign and date below.

Please upload a photograph of Signature:

 

Date Click or tap to enter a date.

**Cont.**

**GDPR Compliance Details**

Do you agree to the Machan Trust holding your personal data for:

Sending Birthday and Christmas Cards Select yes or no

Contacting you with a specific enquiry and to keep you updated on our activities and events, evaluation Forms and Feedback. Select yes or no

Please sign and date below.

Signature:

 

Date Click or tap to enter a date.