

06/03/20

Please complete form in block capital letters

Name of Event/Activity	
Date of Event/Activity	
Venue	

Participant Details	
Participant Name	
Gender (please select)	Male <input type="checkbox"/> Female <input type="checkbox"/>
Address	
Postcode	
Date of Birth	

Contact Details – First Point of Contact (please let this person know you are providing us with their details)	
Name	
Relationship to Child	
Address	
Telephone Number	
Mobile Number	
Email Address	

Emergency Contact Details – Second Point of Contact (please let this person know you are providing us with their details)	
Name	
Relationship to Child	
Address	
Telephone Number	
Mobile Number	

Doctors Contact Details and Medical Information	
Name/Surgery	
Telephone Number	
Does your child have any illnesses, disabilities or allergies that may affect them when taking part in the activity/event? If yes, please provide further details to ensure we have appropriate measures in place.	YES/NO
Does your child require the routine use of any medication or are they currently receiving any medication? If yes, please provide further details. *Please note that any medication will need to be self-administered	YES/NO
I give permission for my child to receive first aid or CPR in the event of an emergency or accident.	YES/NO

Please ensure an East Ayrshire Leisure Marketing & Media Consent Form is now completed

DATA PROTECTION

The information you have supplied above will be used solely for the registration of your child in the specific event you have detailed. We require this information to register your child and to ensure the safety of your child and other children at the event. Without this information we are unable to allow your child to participate in the event. The information will be processed and held securely in terms of Data Protection Legislation. For further information on our legal basis for processing your information and your rights in terms of Data Protection Legislation please visit www.eastayrshireleisure.com to view our Privacy Statement.