

Young person Information form

Version 4 (modified)
July 2020

This form aims to assist in the collecting of information regarding young people under 18 years of age who are looking to join Scouting. The 4th Epping Forest Scout Group require the following information in order to safely run Scouting activities. We cannot allow young people to participate in Scouting activities without parental consent. Details of how we store and use your data is contained within the groups Privacy Policy which can be found here <http://www.4thefsscouts.org.uk/privacy-policy>.

Parents/guardians must sign the form.

For the purposes of this form 'Group' refers to the 4th Epping Forest (Bancroft's) Sea scout group.

Name of Scout Group: 4th Epping Forest (Bancroft's) Sea scout group

Date of joining

D	D	M	M	Y	Y
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Diversity information

Information on members' gender, ethnicity, religion or faith, and disability is requested by the Scouts to help in monitoring its membership. The data will help the Scouts to understand the makeup of the membership - monitoring progress against its inclusivity goals and prioritising development work both nationally and locally - and identify and help leaders meet any specific needs of individuals.

Young person's information

Please complete in block capitals information about the young person

Surname	<input type="text"/>						
Forename(s)	<input type="text"/>						
Known as	<input type="text"/>						
Date of birth	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y
D	D	M	M	Y	Y		
Address	<input type="text"/>						
Town	<input type="text"/>						
County	<input type="text"/>						
Postcode	<input type="text"/>						
YP's school VLE address	<input type="text"/>						

Gender (please tick appropriate box/es)

- Male
 Female
 Other
 Prefer not to say

Nationality



Ethnicity (please tick appropriate box)

White

- English/Welsh/Scottish/Northern Irish/British
- Irish
- Gypsy or Irish Traveller
- Any other White background

Mixed/multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed/multiple ethnic background

Asian/Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background

Black/African/Caribbean/Black British

- African
- Caribbean
- Any other Black/African/Caribbean background

Other ethnic group

- Arab
- Other
- Prefer not to say**

Religion or Faith (please tick appropriate box)

- Buddhist
- Christian (all denominations)
- Hindu
- Jewish
- Muslim
- Sikh
- Other
- No religion

- Prefer not to say**

Disabilities/additional needs

The safety and wellbeing of young people in Scouting is our priority. Please provide information about any disabilities your young person may have so that adult volunteers can ensure reasonable adjustments can be made for your young person. This information will be handled with extra care and only made available to those directly supporting your young person.

Disabilities

(please tick those that apply and provide details)

- Developmental
- Injury
- Physical
- Medical
- Mental health
- Progressive

Guidance

Developmental – ADHD/ADD, Autistic Spectrum Disorder, Dyslexia, Dyspraxia

Injury – Body, Brain

Physical – Spina Bifida, Down's Syndrome

Medical – Allergies, Arthritis, Asthma, Diabetes, Epilepsy, ME/Chronic Fatigue

Mental Health – Bipolar, Depression, Eating Disorder, Self-Harm

Progressive – Muscular Dystrophy

The safety and wellbeing of young people in Scouting is our priority. Please provide medical information (eg medications, assistive technology) so that the section leadership team can ensure suitable care is in place for your young person. This information will be handled with extra care and only made available to those directly supporting your young person.

Please provide information about any other additional needs, or any further information about your young person's disability including any medication taken (with dosage)

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Dietary Requirements

Please provide information about any dietary needs (e.g. allergies, intolerances, religious or cultural requirements) of your young person to assist the section leadership team when they plan the programme of activities.

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Allergies

Please also detail any established treatments including any medication taken (with dosage)

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Does the young person carry an EpiPen?

Date of last Tetanus injection

GP Details

Doctor's name

Surgery Address

Town

County

Postcode

Surgery Telephone

NHS Number

I hereby give my general consent for a Scout Leader or designated First Aider to:

- a) Provide any necessary medical treatment;
- b) Administer medications to treat minor injuries or medical conditions (this includes appropriate treatments for colds, flu, stomach upsets, cuts and grazes, headaches and other minor illnesses as deemed necessary);
- c) Administer the young person's EpiPen if they are carrying it and we have been informed;
- d) Sign any documentation required in the event of hospital treatment

whilst the Young Person is taking part in Scouting activities. I understand this information is provided for the wellbeing of the Young Person and agree to this information being shared when necessary for the wellbeing of the Young Person.

Signature

Print

Contact details

Each Scout Group, including its Executive Committee is a Data Controller with overall responsibility for compliance with data protection and how they communicate with you locally. 4th EFS Scouts communicates via the primary email addresses recorded for each parent/guardian using scoutleaders@4thefsscouts.org.uk and cubleaders@4thefsscouts.org.uk

The 4th Epping Forest Scout group will use the Primary Contact as the point of contact during events such as outings and camps to notify parents/guardians of return timings or other changes to itinerary. The primary contact should therefore be the person who would normally be available during events to receive these details. The Primary Contact will receive all administrative emails (including event and activity sign up requests) and text messages from the group. The secondary email will only receive administrative emails (including event and activity sign up requests)

1st Parent/guardian information

Title	<input type="text"/>
Forename(s)	<input type="text"/>
Surname	<input type="text"/>
Relationship	<input type="text"/>
Address	<input type="text"/>
Town	<input type="text"/>
County	<input type="text"/>
Postcode	<input type="text"/>

A primary email address is required for each named parent/guardian that should be a private email address only used by this contact as consent for camps and activities will be accepted as from the named contact if it originates from this email address.

Please note that should we need to notify you via our SMS system during a scout trip, only the primary parent/guardian contact mobile number provided will be used unless you specify otherwise:

Please tick here if you wish the second contact to receive trip emails from our Online Scout Manager system.

One of the contact telephone numbers should be a mobile number.

Telephone numbers

Home	<input type="text"/>
Work	<input type="text"/>
Mobile	<input type="text"/>

Email address

2nd Parent/guardian information

Title	<input type="text"/>
Forename(s)	<input type="text"/>
Surname	<input type="text"/>
Relationship	<input type="text"/>

Please tick here if the address is the same as the main contact. If different, complete address details below.

Address	<input type="text"/>
Town	<input type="text"/>
County	<input type="text"/>
Postcode	<input type="text"/>

A primary email address is required for each named parent/guardian that should be a private email address only used by this contact as consent for camps and activities will be accepted as from the named contact if it originates from this email address.

One of the contact telephone numbers should be a mobile number. This number will be used in case of emergency but will not receive text messages from our SMS service during scout trips.

Telephone numbers

Home	<input type="text"/>
Work	<input type="text"/>
Mobile	<input type="text"/>

Email address

Alternate emergency contact

Title	<input type="text"/>
Forename(s)	<input type="text"/>
Surname	<input type="text"/>
Relationship	<input type="text"/>

Telephone numbers

Primary	<input type="text"/>
Secondary	<input type="text"/>

Gift Aid

Gift aid information for the HMRC is not collected using this information form. Please complete the gift aid details via the Online Scout Manager system as this increases the total the we receive from the termly subs and extends the range of activities we are able to provide.

Declarations (Please retain a copy of this page for your own records)

Full name of young person

Photographs, video and audio

The following consent options concern photography and other media of the young person being published as described in the 4th Epping Forest South (Bancroft's) Sea Scout Privacy Policy (<http://www.4thefsscouts.org.uk/privacy-policy>).

Photos, video or audio of the young person in this form will not be used unless you give us your consent below. If there are reasons why this consent cannot be given please do not sign this form but contact the Executive Committee so that the needs of your child can be discussed with a view to making alternative arrangements which allow them to participate in Scouting.

- a) I am happy for photos, video and audio to be published of the young person in this form whilst undertaking Scouting activities across all channels as detailed in the 4th Epping Forest South (Bancroft's) Sea Scout Privacy.

Additionally, other Scout Groups, Districts, Counties/Areas/Regions and UKHQ may request consent independently as part of event registrations or other Scouting activities.

Communication preferences

Your email address and telephone number will be used by adult volunteers within the Group as the primary method to communicate with you. In addition, the Group may use additional communication tools:

- I agree to the Group sharing my phone number and name with other parents and members of the Group via a closed group via communication platforms, for example WhatsApp;
- I do not agree for my phone number and name shared in this way.

Data protection

The Scout Association is committed to the Data Principles of the General Data Protection Regulation and the Data Protection Act 2018. By signing this form, I agree to the Group during and beyond my young person's involvement with the organisation:

- a) retaining personal data to facilitate any present or potential future involvement with Scouting, in line with the as described in the 4th Epping Forest South (Bancroft's) Sea Scout Privacy Policy.
- b) retaining sensitive (special category) data regarding religion/faith, disabilities/additional needs, ethnicity, medical information and/or commission of offences or alleged offences, as described in the 4th Epping Forest South (Bancroft's) Sea Scout Privacy Policy.
- c) allowing access to personal data to appropriate individuals within the hierarchy of Scouting.

General

- a) I understand that while undertaking Scouting activities the leaders will operate under the rules and procedures of The Scout Association UK. (details can be found at www.scouts.org.uk/por with full details of the operating Policy, Organisation and Rules)
- b) I understand that as a parent I will be required to provide a Scout uniform which my child will be required to wear at meetings.
- c) I understand that there is a subscription fee for Scouting which is paid directly to The 4th EFS via an online payment system.

Parent / Guardian 1

Parent / Guardian 2

Signature

Signature

Print

Print

Date

Date

Should you require any support with the completion of this form please contact your Section Leader. Should any details or consent options change you must inform your Section Leader or email them at scoutleaders@4thefsscouts.org.uk or cubleaders@4thefsscouts.org.uk.

For further queries contact the Scout Information Centre on 0345 300 1818 or email info.centre@scouts.org.uk, Scottish Headquarters on 01383 419073, or Northern Ireland Headquarters on 028 9049 2829.