

Information and consent for event/activity



WE DISCOVER, WE GROW

Girlguiding

Name of event Milton Keynes Parade and Ceremony

Part I - to be completed by the leader. The parent/carer* should retain a copy of all the information in Part I.

Please return this form to Karen Humble (Rabbbit), Unit Leader (name)

By Thursday 2nd June 2022 (date)

Proposed activity(ies)

Girlguiding, joining the MK Parade, celebrating the Queen's Platinum Jubilee. Walking from Church of Christ the Cornerstone, CMK to, MK Rose, Campbell Park for Ceremony with other organisations.

Location Church of Christ the Cornerstone, CMK to MK Rose, Campbell Park.

Start date and time 02/06/2022 09:15 a.m.

Finish date and time 02/06/2022 11:00 a.m.

Cost FREE Travel/transport information Drop off at Church of Christ the Cornerstone



This is a large-scale event (where over 100 participants are present).

Please tell your unit leader if you DO NOT wish photos/videos of your child to be taken at this event.

Additional information

Uniform to be worn and sensible walking footwear. Possible need for a sun hat too. This does not have to be a uniform hat.

A disposable weather Poncho will be supplied by unit if, required. Union Flag for waiving will be supplied by unit.

No mobile phones or electronic goods allowed they are not covered by our insurance.

Please ensure you fill in the part of the form regarding photo permission on page 2.

You only need to print Part II, sign and hand it to Unit Leader.

On the day, contact Karen on 07565908514.

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Part II - to be completed by the parent/carer of participants aged under 18.

This form can be returned electronically.

Participant's full name _____

Participant's membership number _____ Age at start of event _____

Unit name 1st Emerson Valley Rainbows

Please provide details of any disabilities, health or access needs (including allergies) that are relevant to this event.

Please provide any extra information that will help us make the event accessible for your child (e.g. dietary requirements, requirement for a prayer space).

If the event includes water activities, can the participant swim 50 metres? Yes ☐ No ☐

NOTE: Please label any medication with your child's name and provide clear instructions for its use. If applicable, ensure that a spare, clearly labelled inhaler or EpiPen is brought to the event to be held by the first aider.

Emergency contact

Please give details of a person who will be contactable at all times during the event/activity.

Name _____

Telephone 1 _____ Telephone 2 _____

Email _____

Address _____

How do they know the participant? _____

Consent

I give permission for my child (*named overleaf*) to take part in _____
(*event/activity*) and for the medication noted here to be administered (if applicable).

Parent/carer's name _____ Date _____

* Where the term parent/carer is used, this refers to the adult that has legal responsibility for this child.

What will you do with my data?

It's simple. We need the information you share with us to run our exciting activities and to satisfy our legal responsibilities. We'll keep it safe for as long as your child is an active member.

We promise we'll only share your information if:

- you ask us to
- the law requires us
- in order to comply with our policies so your child can enjoy an activity safely
- it's in the public interest

Don't worry - we'll never sell your data or share it for any other reason.

Girlguiding is the registered data controller* for all our members' personal information, both in the UK and around the world.

Want to find out more about how we use your information - and your rights?

Visit **www.girlguiding.org.uk/privacy-notice/**

* The organisation that manages and looks after your data