

## Childrens Activity Child Registration Form

| Ch | ilds | deta | ils |
|----|------|------|-----|
|    |      |      |     |

| Name:               | Male/Female |
|---------------------|-------------|
| Date of Birth:      | Age:        |
| Address:            |             |
|                     | Postcode    |
| Preferred language: |             |

| Contact details  |  |  |
|--|--|--|
| Parent / Guardian name:  |  |  |
| Contact telephone:   |  |  |
| Please provide <b>an</b> alternative contact in the case of an emergency |  |  |
| Name:  |  |  |
| Relationship to child:   |  |  |
| Contact telephone:   |  |  |
|  |  |  |

| Emergency details |         |
|-------------------|---------|
| Doctor's name:    |         |
| Surgery:          | Tel no: |

| <b>Medical Information</b><br>Does your child:<br>Have any allergies/medical conditions         | (if yes, please provide further detail)<br>Yes/No |  |  |  |
|---|---|--|--|--|
| •••••   |   |  |  |  |
| Take any medication at this time:   | Yes/No  |  |  |  |
|   |   |  |  |  |
|   |   |  |  |  |
| Any other information you feel is relevant that may affect your child or where they may require |   |  |  |  |
| additional support? (Including social and behavioural d   |   |  |  |  |
|   |   |  |  |  |
|   |   |  |  |  |
|   |   |  |  |  |
| •••••   |   |  |  |  |
|   |   |  |  |  |
|   |   |  |  |  |

| Newport Live is serious about recording accurate personal data and keeping it safe. To comply with the Data Protection Act 2018 and the General Data Protection Regulations, Newport Live is requesting that you provide the necessary consent to the following statements. I consent to: |                         |                              |                       |  |  |
|---|-------------------------|------------------------------|-----------------------|--|--|
| My child having their p   | bhotograph taken for pu | ublicity materials including | g social media Yes/No |  |  |
| • My child receiving emergency medical treatment that is authorised by Newport LIVE staff,<br>if <b>no</b> contact can be made with the parent /guardian: Yes/No  |                         |                              |                       |  |  |
| <ul><li>My child's information being shared</li><li>Newport Live Services</li></ul>   |                         | Yes/No                       |                       |  |  |
| Newport Live contacting me about relevant news and offers via:  |                         |                              |                       |  |  |
| Email Yes/No  | Phone Yes/No            | Text Yes/No                  | Post Yes/No           |  |  |
|   |                         |                              |                       |  |  |

Parents / Guardians Name:..... Signature:..... Date:..... Email Address:....

We take your data security seriously and will never sell or swap your details with third parties except where required to do so by law or with your consent. You can withdraw your consent to be contacted at any time by calling 01633 656757 or email <u>customerservice@newportlive.co.uk</u>. Information about how we protect and use your personal data is set out in our privacy policy at newportlive.co.uk/privacy.

This form is available in Welsh