

Youth Service Membership Form (Delivered by The Sound Emporium on behalf of LifeRocks CIC)

Member Details:

Name:
Date of Birth:
Age:
Address:
Telephone Number:
Email Address:
Name of school/college that you attend:

Emergency Contact Name:
Telephone Number:
Relationship to member:

Do you consider yourself disabled?:
If so what adjustments need to made?:
Please list any allergies:

I confirm I have read and agree to abide by the code of conduct and that all information supplied on this form is complete and accurate:

Signature of member:
Date:

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Photography Consent

Whilst participating in Sound Emporium activities, staff of The Sound Emporium and media representatives may wish to interview, record, photograph or videotape you for use in publications, and on websites. The photographs may be of groups of students or individuals, and the students' names may be used. For student protection online, a student's photo and last name will not appear together on The Sound Emporium website.

Before any photographs or images can be published by us, your consent (agreement) must be obtained

Please tick one:

☐

I give permission

☐

I do **not** give permission

Data Protection

The Sound Emporium has a duty to protect personal information and will process personal data in accordance with the Data Protection Act 1998 and any amendments to that act. The personal data you provide on your membership form will be used by The Sound Emporium, and if necessary for the detection or prevention of crime and in an anonymised format for statistical purposes for partners. All data will be stored on computer and/or in manual files and be either password protected or in a locked and secure location.

You have a right to a copy of your information held by any organisation, with some exceptions. To gain access to your personal data held by The Sound Emporium or if you have any Data Protection concerns please contact us directly.

Parental Permission (for under 18's)

If you are under 18 a parent/guardian **must** countersign this form

As a parent/Guardian I confirm I have read, agree with and fully understand the membership procedure for the free youth service provided by The Sound Emporium on behalf of LifeRocks CIC. I confirm that all information supplied on this form and supporting documents is complete and accurate. I give permission for my child to participate in activities run by The Sound Emporium.

Name:
Address:
Telephone Number:
Email Address:
Relationship to member:
Signature of parent/guardian:
Date: