

**Bathford Players**  
**Parent/Guardian Consent Form for young Actors**

Please complete a separate form for each child

**Full name of child:**.....**Age:**.....

**Who has parental responsibility for young person?**

Mother/Father/Both/Other

If other, please specify.....

**Names** of those with parental responsibility

.....

.....

**Address(es):**.....

.....

**Telephone Numbers:**

Home:.....Work:.....

Mobile:.....

**E-mail:**.....

**Emergency contact:**.....

**Name(s) of adult(s) who will collect child at end of rehearsals and/or performances?**

.....

**Is there anyone who is NOT to collect child?**

.....

**Is there any health-related information of which we should be aware**

.....

## **Declarations of consent:**

(Only to be signed by someone with parental responsibility for the child)

I confirm that the information given on this form is, to the best of my knowledge, complete and correct.

I give permission for the personal information provided by me to be held on a database by Lennie Almond, (Producer/Director of Calamity Jane), for the duration of this production. I agree to a cast contact list being shared with cast and committee members of Bathford Players.

I give permission for photographs to be taken and used for press releases or publicity. (Names will not be given to external organisations.)

I give permission for a video recording of the pantomime to be made, and viewed solely by cast; members of Bathford Players, and parents of young actors.

I give permission for a suitably qualified cast member (Anna Chippendale-Budd), to administer simple First Aid where necessary.

Should any urgent matters of concern arise, I give permission for contact to be made by the designated Chaperones (Lennie Almond or Anna Chippendale-Budd) with the appropriate medical/health/social services authorities.

I agree to pay a subscription of £2 per child for insurance purposes NOW; cheques to be made payable to Bathford Players.

**Signed**.....

**Name** (please print).....

**Date**.....