

# Denmead Brass Membership Form



The information in this document is confidential and is subject to data protection legislation and the band's General Data Privacy Policy. This information will not be shared with any third party.

## Section 1: Personal Details

Full Name:	Date of Birth: / /
Address:	Home Phone:
	Mobile No:
	Email Address:
Instruments Played: Name of band you are currently registered with:	
Please give details of any special circumstances or additional needs that might affect you/your child whilst taking part in activities, listing any relevant medications (Disability/Medical/Allergies etc.) If there is no information, please write 'None'	
In the case of an accident, illness or incident, it may be necessary for authorised persons acting on behalf of the band to obtain urgent treatment for you. Please tick the appropriate box in section 2 to give your consent. Please remember to notify a member of the Safeguarding Team if there is any change in any medical condition.	
Do you have any <b>safeguarding history</b> to declare, prior to any formal <b>Disclosure and Barring Services</b> application? YES / NO (delete as appropriate, and if YES, please provide in writing on a separate sheet).	

<b>Please provide two people who we can contact in the case of an emergency:</b>		
Name 1:	Tel No:	Relationship:
Name 2:	Tel No:	Relationship:

Please Tick or Cross as appropriate		
I agree to the band using the following methods to communicate with me.		
<input type="checkbox"/> <b>phone</b>		
<input type="checkbox"/> <b>text</b>		
<input type="checkbox"/> <b>email</b>		
<input type="checkbox"/> I consent to emergency treatment being given by trained personnel to the member named above.		
<input type="checkbox"/> I am happy for the band to take <b>photographs and/or video</b> of the member named above, and to use them on the band website, Facebook page, and in the band's publicity material (e.g. concert programmes).		
I consent to the band to collect, store and use this data for membership administration purposes in accordance with the band's General Data Protection Policy, and I agree to abide by the bands safeguarding policies and procedures (Code of Conduct, Anti-Bullying etc.).		
Signature:	Date:	Print Name:
<b>Once complete, please return this form to the bands safeguarding lead (Linda Groves)</b>		

## Section 2: Consent (For members under 16 years of age a parent/legal guardian must sign on behalf of the child.)

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If you are not happy for us to use information in the ways we have listed above, that's no problem – we will accommodate your preferences. Similarly, if you change your mind at any time, you can let us know by emailing [secretary@denmeadbrass.org.uk](mailto:secretary@denmeadbrass.org.uk)