



## Handbell Ringers of Great Britain General Consent Form for Regular Groups/Activities



*(This form should be filled in annually and kept with the group's records where it can be accessed in case of emergency. All those working with the child named on the form should be made aware of any health and dietary concerns which are given so that the child's needs may be met.)*

|  |  |
|--|--|
| <b>Name of your handbell group:</b>  |  |
| <b>Title of the Group:</b>   |  |
| <b>Full Name of Child/Young Person:</b>  |  |
| <b>Date of Birth:</b>  |  |
| <b>Address:</b>  |  |
| <b>Telephone Number:</b>   |  |
| <b>Are there any medical or dietary concerns that we should know about your child? (Please continue overleaf if necessary).</b>  |  |
| <b>Name of Parent or Carer:</b>  |  |
| <b>Name/tel. no. of an additional contact:</b>   |  |
| <b>I give my permission for the Child/Young Person named above to take part in the normal activities of this group. I understand that transport to and from the activity is my responsibility.</b> |  |
| <b>Signature of Parent or Carer:</b>   |  |
| <b>Name:</b>   |  |
| <b>Date:</b>   |  |

## **Emergency Information**

|   |  |
|---|--|
| <b>Name of next of kin:</b>   |  |
| <b>Address of next of kin:</b>  |  |
| <b>Contact telephone number: Home</b>   |  |
| <b>Contact telephone number: Mobile</b>   |  |
| <b>Please read and sign:</b><br>I have read the information which has been supplied about this visit and give my permission for my child to take part in this activity. |  |
| <b>Signature of Parent or Carer:</b>  |  |
| <b>Name:</b>  |  |
| <b>Date:</b>  |  |

# HRGB Safeguarding and Child Protection Introduction and Policy

## Photography and filming consent form

In accordance with the Safeguarding and Child Protection Policy 2020, Handbell Ringers of Great Britain will not permit photographs, video or other images of young people to be taken without the consent of the child, or of the parent if the child is under 16

Handbell Ringers of Great Britain will take all steps to ensure that photographic images are used solely for the purposes they are intended. If you become aware that these images are being used inappropriately you should inform the region's Safeguarding Officer immediately.

| <b>Consent information:</b>   |                          |
|---|--------------------------|
| <i>To be completed by child (age 16 to 18)</i>  |                          |
| <input type="checkbox"/> I give permission for my photograph to be used by HRGB for display purposes<br><input type="checkbox"/> I give permission for my photograph to be used by HRGB in printed publications<br><input type="checkbox"/> I give permission for my photograph to be used on HRGB's national and regional websites<br><input type="checkbox"/> I give permission for videos of me to be used on HRGB's national and regional websites<br><input type="checkbox"/> I give permission for my photograph to be used on HRGB's social media pages<br><input type="checkbox"/> I give permission for videos of me to be used on HRGB's social media pages |                          |
| <b>Signature of child:</b>  | <b>Print name child:</b> |
| <br><br>  | <br><br>                 |
| <b>Date:</b>  |                          |

If the child is under 16, consent must be obtained from parents.

If over 16, it is still considered good practice to inform parents that photographs/videos of their child may be used if the child has given consent.

| <i>To be completed by parent:</i>  |                              |
|--|------------------------------|
| <input type="checkbox"/> I give permission for my child's photograph to be used within HRGB for display purposes<br><input type="checkbox"/> I give permission for my child's photograph to be used by HRGB in printed publications<br><input type="checkbox"/> I give permission for my child's photograph to be used on HRGB's national and regional websites<br><input type="checkbox"/> I give permission for my child to be videoed for use on HRGB's national and regional websites<br><input type="checkbox"/> I give permission for my child's photograph to be used on HRGB's social media pages<br><input type="checkbox"/> I give permission for my child to be videoed for use on HRGB's social media pages<br><br><input type="checkbox"/> I can confirm that I have read, or been made aware of how these images or videos will be stored within the organisation. |                              |
| <b>Signature of parent:</b>  | <b>Print name of parent:</b> |
| <br><br>   | <br><br>                     |
| <b>Date:</b>   |                              |