

Participant Registration

First Name and Surname				<i>(please circle)</i> Male Female
Address & Postcode			Mobile Phone	
			Home Phone	
Email Address				
School or college				
Date of Birth			Age	
Emergency Contact	Name		Telephone	
Do you have any medical conditions or allergies we need to be aware of?				
		<small>Note: this information will only be referred to if you become ill and need first aid.</small>		

Do you have a disability? *circle* Yes No

What is your ethnicity? *please circle below or* Prefer not to say

Asian British Bangladeshi Indian Pakistani Sri Lankan Other _____

Black British Caribbean African Somalian Congolese Nigerian Other _____

White British Irish European Cypriot Turkish Kosovan Kurdish Other _____

Other Chinese Moroccan Iraqi Iranian Latin American Arab Other _____

Mixed Circle two that apply or _____

What is your religion? *please circle*

Prefer not to Say No Religion Christian Jewish Muslim Hindu Buddhist Sikh Other _____

Data Protection

We will handle the information you have provided in line with the provisions of the Data Protection Act. For our full Privacy Policy see the hub websites. In short, the information you have provided will be used to:

- Send you information by letter, e-mail or to phone with relevant information about young people's services
- Contact someone in an emergency
- Check if you have any medical conditions or allergies in an emergency
- To inform funding bodies about the young people whom our projects reach

In addition, details will be shared with Islington Council and input into the Integrated Youth Services Database. Islington Council may also use this information for other legitimate purposes and may share this information where necessary with other organisations responsible for administering services to children and young people.

Photography Policy

We take photos of activities to evidence outcome targets to funding bodies. These will never be made public. When taking photos for publicity or media then individual consent will be requested at every photo session.

If any details change please let us know.

Date of registration _____ signed _____