

# 2nd Onchan Scout Group

## Members Info



Full Name	Known as
Address   Postcode	Date of Birth
	Nationality
	Religion or Faith
	School
<b>Emergency Contact 1</b>	
<b>Emergency Contact 2</b>	
Name	Name
Relationship to the member	Relationship to the member
Address if different from above   Postcode	Address if different from above   Postcode
Home Phone	Home Phone
Mobile Phone	Mobile Phone
Email	Email
Permit emails from your child's Leaders <input type="checkbox"/>	Permit emails from your child's Leaders <input type="checkbox"/>
<b>Medical Details</b>	
Doctor	Telephone
Surgery Address   Postcode	
Dietary Needs	
Medical Information	
Any other information we should be aware of	
<p><b>Data Protection</b></p> <p>The Scout Association is committed to the Data Principles of the General Data Protection Regulation and the Data Protection Act 2018. By signing this form, I agree to the Group during and beyond my young person's involvement with the organisation:</p> <p>a) retaining personal data to facilitate any present or potential future involvement with Scouting, in line with the local Group Data Protection and Retention Policy</p> <p>b) retaining sensitive (special category) data regarding religion/faith, disabilities/additional needs, ethnicity, medical information and/or commission of offences or alleged offences, in line with the Group Data Protection and Retention Policy</p> <p>c) allowing access to personal data to appropriate individuals within the hierarchy of Scouting.</p>	<p><b>Photographs, video and audio</b></p> <p>The following consent options concern photography, video and audio footage of the young person in this form being published via the following: Group internally controlled publications and communication channels, such as online news, email, websites, newsletters, at the Group meeting place, Group social media channels, Group advertising and/or promotional material including press.</p> <p>Photos, video or audio of the young person in this form will not be used unless you give us your consent below.</p> <p><b>Please select:</b></p> <p><input type="checkbox"/> I am happy for photos, video and audio to be published of the young person in this form whilst undertaking Scouting activities across all channels; or</p> <p><input type="checkbox"/> I do not want any photos, video or audio to be used.</p> <p>Additionally other Scout Groups, Districts, Counties/Areas/Regions and UKHQ may request consent independently as part of event registrations or other Scouting activities.</p>
Signed by Parent or Guardian	Date
<b>Please return this completed form as soon as possible.</b>	