



**The Buzz - Youth Arts Festival
Booking Form for Workshops & Activities**



****Please phone in advance to confirm availability before returning this form**

First Name		Surname	
Address Line 1			
Address Line 2			
Town		County	
Post Code			
Home Phone		Mobile Number	
Email			
D.O.B		Age	
Gender	MALE / FEMALE		

N.B Your confirmation will be sent by email/post so please check your inbox regularly

For the following, please refer to the information in the brochure or phone for details.

Name of Workshop	Date/s	Time/s

Please make sure your child arrives 10 minutes before the workshop is due to start in order to sign in

If the workshop takes place over a full day, please bring a packed lunch.

2. Does your child have any medical conditions that we should be aware of?

This information will be treated as confidential

YES/NO

If YES please state the condition in the space provided below

3. Do you consider your child to have a disability?

This information will be treated as confidential

YES/NO

Disability: Defined under the Disability Discrimination Act 1995 as ‘a physical or mental impairment that has a substantial and long term adverse effect on a person’s ability to carry out normal day to day activities’

If YES, what is the nature of the disability?

4. Emergency Contact

Name	
Telephone Number	
Mobile Number	

NB: This person should be available on this telephone number during the workshop sessions.

5. Media Permission

There may be photography and sound/video recording during the workshops. These will be used in public reports, evidence and display purposes about the festival.

Photographs and video footage may be uploaded to the internet via www.thebuzzwebsite.co.uk

I agree/do not agree to my child being recorded / photographed whilst attending the workshops. (Please delete where appropriate)

Yes, I do wish my details to be held on your mailing list.

Agree to your personal details being shared with other venues/services within Cultural Services so that they can contact me about their events and services? (i.e, Normanby Hall Country Park and Golf, 2021 Arts Development, Museums)

No, I do not wish to remain on your mailing list, please delete my records.

I consent to my child participating in the above workshops and agree to all of the information above.

Signature of Parent/Guardian

Name

Please complete this form and post to:

Janine Knight
The Ropewalk
Maltkiln Lane
Barton upon Humber
North Lincolnshire
DN18 5JT

Young people will not be able to participate in the workshop if this form has not been completed, signed and returned.

