

Durham Scouts

Medical & Permission Form – Over 18

[To be completed by individual]

Surname		Group	
First Names	Date of birth	Email Address	
Home Address (if different on date of camp please use back of form)	Telephone Number	Family Doctor's Name and Address	
	Emergency contact name and telephone number		

Information for our onsite first-aider (e.g. allergy to sticking plaster, dietary needs)	Medical Conditions / Additional Needs / Any prescribed medication to taken during the event/activity?

Photograph Policy
 During Durham Scout events and activities, members of our media team, other members of the Scout Association and members of the public may be taking still and moving pictures. Pictures used by Durham Scout County outside of the event/activity will only be used in accordance with Scout Association guidelines. Pictures taken by our media team may be used during and after the event/activity in Durham Scout or the Scout Association publications, and in local newspapers, on websites or in other media channels. Local newspapers and TV stations may also attend events/activities to provide external media coverage and members of the press will be accompanied at all times by a member of the event or activity staff/leader team. We will seek your specific permission if we wish to use your/your child's picture in any promotional or advertising material. Anyone attending any Durham Scout County event or activity or giving permission for their child/ward to attend an event or activity should note that attendance at the event or activity signifies their consent for pictures of themselves/their child to be used in line with the above policy. If you have specific concerns in this regard, please contact the specific event/activity manager.

Data privacy
 I consent to the personal information contained in this form and my t-shirt size and information about my diet to be used for the purposes of administering the event, including; ensuring that the correct security wristband is assigned, correct t-shirt size ordered and meal options provided (if applicable to the event); for providing any necessary first aid or any necessary pastoral support. We will not use this data for any other purpose, except in anonymised aggregate form to provide statistics for historical reference. We will securely destroy this form after the event and we will delete this data one year after the event ends, unless you are involved in a medical incident, in which case we shall keep the data and form for three years.

Signed	Date