Activity Information Form



DATA PROTECTION

Event:

Date:

Blackpool Zoo Visit

23/03/2024

Meeting place and time:

This form is used to collect information about your young person for the purpose of the event named below, this is to be used by the section leadership team only. As part of this form we collect personal data about your young person. This detail is required so that we can register them for the event. This form also collects sensitive (special category) data about your young person, this detail is required so that we can offer additional support if required and keep your young person safe whilst in our care. We may share your personal data in this form with third parties, for event registration. These third parties are used on the basis that they align with our data privacy policies. We take your personal data privacy seriously. The data you provide to us is securely stored [based on local arrangements] and will be kept for 2 months after the event for any queries that arise before being securely destroyed. For further detail please visit our Data Protection Policy available at scouts.org.uk.

Blackpool Zoo

Please keep this top section for your own information. Detach and return the bottom section to the organiser.

Blackpool Zoo, 10:00am

Location:

Collection place and time:	Blackpool Zoo, 3:30pm				
Cost and payment schedule if applicable:	£10 (please make cheques/bank transfers payable to 1st New Longton Scout Group)				
Transport details:	Arrange own transport				
Activities:	N/A				
Further details (including supervision arrangements section leaders will not be present):	where the $$	N/A			
Organiser and contact details:		Harrison Turner, Mob: 07763 680058			
Contact details during the event: Harrison			Turner, Mob: 07763 680058		
Note: All activities will be run in accorda will be accepted by the organisers and T					ing and effects
Please complete and return this sec	ction to: Harrison	or Paul	by 18/03	/2024	
Event: Blackpool Zoo Visit					
Name of young person:			D.o.B:		
Are they able to swim 50 metres and stay afloat in lig			t clothing?	Yes No	
Emergency contact:			Phone:		
Cost and payment schedule if applicable: Doctor's name and contact de		eques/bank tra		w Longton Scout Group) cations currently being	taken:
Details of any disabilities, medical conditions, allergies, additional needs or cultural needs that organisers might need to be aware of:			Details of any infectious diseases they have been in contact with in the last three weeks:		
I enclose a cheque / cash or ma I have noted the arrangements Signed: Relationship to young person	above and agr		= :	ayment schedule outline ing part. Date:	ed above.