**PARTICIPANT PERMISSION FORM**

**Dancer Information**

|  |  |
| --- | --- |
| Full Name |  |
| Date of Birth and Age |  |
| Contact Number |  |
| Email Address |  |
| Allergies/ Health Care Information/ Access Requirements/ Additional Support Needs |  |

**Parent/ Carer Information (Required if aged under 16 years)**

|  |  |
| --- | --- |
| Parent/ Carer Name |  |
| Relationship to Child |  |
| Contact Number |  |
| Email Address |  |
| How will your child be dropped off/ collected?  *If given permission to travel independently, please state. Please state all individuals authorised to collect your child.* |  |

**Emergency Contact (To be contacted during workshop times)**

|  |  |
| --- | --- |
| Emergency Contact Name |  |
| Emergency Contact Number(s) |  |
| Secondary Contact Name |  |
| Secondary Contact Number |  |

**FOR THE FOLLOWING SECTIONS PLEASE MARK IN THE APPROPRIATE CHECKBOX IF YOU AGREE WITH THE RELEVANT STATEMENT.  
  
Outdoor Working Permission**This project entails outdoor working.  
  
I give permission for my child to work outside during the rehearsal period.  
This will include walking approximately ten minutes to Dock Park.   
  
I give permission for my child to perform outside on Queensberry Square on Saturday 16th October 2021.

**Photographic Consent**

I agree that the photographs, video and audio recordings taken at the event can be used for the following:

* In print format in the media (newspapers, magazines)
* For use by Dumfries and Galloway Dance, DG Arts Festival or Cultured Mongrel in promotional materials (leaflets/ flyers)
* To promote Dumfries and Galloway Dance, DG Arts Festival or Cultured Mongrel on website and social media
* To promote the work of Dumfries and Galloway Dance, DG Arts Festival or Cultured Mongrel at conferences or as part of presentations

**Lunch Breaks**I confirm that participants are responsible for providing all food and water as required for each working day.   
  
Please select one statement from those listed below:

My child has permission to leave the workshop space during lunch breaks to purchase food.   
I understand that this would be unsupervised.   
  
My child does not have permission to leave the workshop space during lunch breaks to purchase food. They are to always remain supervised as part of the group.  **Dancers Under 12.**

For all dancers under 12, a nominated adult (age 18+) must be physically present to supervise them during all rehearsals and the performance.  
  
Please give details of the nominated adult here:

|  |
| --- |
| **Name:** |
| **Contact Number:** |

**Covid-19 Protocol**

The following measures will be put in place to ensure all participants safety for the duration of the project.

* We will work with windows open at all times.
* Dancers will be temperature checked at the beginning of each day, using a no contact thermometer.
* Masks will be mandatory for all attendees and optional for dancers under 12 in accordance with Government Guidelines. Medical exemptions apply.
* Dancers will not be working with contact and will rehearse in small groups/ bubbles to minimise the number of people they work in close proximity with.
* Sanitiser will be provided around the building and dancers will asked to use it regularly, particularly when entering the premises.
* Parents will be asked to remain in the foyer or wait outside to collect dancers.

I understand and agree to comply with the regulations as stated above.    
  
We also recommend that all dancers over 12 take a lateral flow test prior to their first workshop and at the midpoint of the week. All tutors will lateral flow test regularly.

**Signature**

To be signed by the participant if over 16, or the parent/carer if under 16.

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| --- |
| **Signed:** |
| **Printed:** |
| **Date:** |