

**DICE FUTURES 2024 REGISTRATION FORM**

Date issued:

Initials of leader:

To be completed by the person with parental responsibility

**Young people taking part in any DICE Project activity are required to return this registration form, FULLY completed.**

Unfortunately, in the event of the form not being returned, the young person will be unable to attend any DICE Project activities until such time as it is returned. All information submitted on this form will be securely held, in confidence.

**Name of young person: D.O.B:**

**Address: Postcode:**

**Emergency contact:**

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| --- |
| Name of **1st** Emergency contact person: |
| Email address: Mobile: |
| Name of **2nd** Emergency contact person: |
| Email address: Mobile: |

**Medical Information & allergies: please continue on** **back of sheet if required.**

|  |  |  |
| --- | --- | --- |
| I give permission for this young person to participate fully in all general youth club activities, and also walks and outdoor activities/games organised by DICE staff during youth club time in local parks and outdoor spaces, weather permitting; | **Yes** | **No** |
|  |  |

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| --- |
| Please detail any **medical issues** that DICE staff should be aware of: |
| Please detail any **allergies** that DICE staff should be aware of:Please confirm that they carry an Epi-pen if required:  |

**Permissions:**

|  |  |  |
| --- | --- | --- |
| **I allow my child to:** | **Yes**  | **No** |
| Participate in/create DICE Tik Tok videos |  |  |
| Participate in/create DICE youtube videos |  |  |
| Have their photo/image taken during youth club activities and for these materials to be used for publicity purposes in presentations on DICE & NDCN social media platforms |  |  |
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|  |  |  |
| --- | --- | --- |
| **I allow my child to:** | **Yes**  | **No** |
| Travel in a minibus during DICE activities |  |  |
| Sign out of club before the finish time |  |  |
| Walk home/make own way home from club |  |  |
| Receive emergency medical treatment from a qualified person |  |  |

Whilst all reasonable precautions will be taken to ensure your child's safety, the DICE Project cannot accept responsibility for any accidents or incidents arising from unauthorised behaviour by young people.

**I UNDERSTAND THAT THE NDCN DICE GDPR POLICY IS AVAILABLE ONLINE AT: WWW.NDCN.CO.UK**

I UNDERSTAND THAT MY YOUNG PERSON IS REQUIRED TO ADHERE TO A CODE OF CONDUCT - SAFE, FUN & WELCOMING FOR ALL.

**Signed: Date:**

**Thank you for taking the time to complete this form. Please return it to DICE Staff or email to:** **manager@ndcn.co.uk**