

YOUTH SERVICE REGISTRATION FORM

(To be completed for ALL young people attending the scheme)

Dear Parent/Guardian

- It is the policy of The Pioneer Group/Compass Support to provide a safe and secure environment in which young people can thrive and develop and where all aspects of their welfare will be protected.
- The Pioneer Group/Compass Support has in place a process for the referral of child protection concerns to the Children and Families Directorate. These procedures are consistent with the good practice guidelines of the Birmingham Local Safeguarding Children Board and the Independent Safeguarding Authority.
- By signing this form you authorise The Pioneer Group/Compass youth workers to take emergency decisions on your behalf in relation to the named child, if after making every reasonable effort we have failed to contact you. This includes seeking medical treatment from a qualified medical practitioner
- In order to provide a safe and excellent service for children we need them to be registered for Child Protection and Health & Safety purposes.
- Please complete the registration details below for your child:

Name of Young Person:

Date of Birth:

 /

Age:

Address

Gender:

Male

Female

Ethnicity of young person (Equal Opportunities):

To help us monitor our Equal Opportunities Policy, please complete the following boxes as appropriate:

- | | | | |
|--------------------------------------|--|-------------------------------|---|
| White | <input type="checkbox"/> White British | Black or Black British | <input type="checkbox"/> Caribbean |
| | <input type="checkbox"/> White Irish | | <input type="checkbox"/> African |
| | <input type="checkbox"/> White Other | | <input type="checkbox"/> Other |
| Mixed | <input type="checkbox"/> White & Black Caribbean | Asian or Asian British | <input type="checkbox"/> Indian |
| | <input type="checkbox"/> White & Black African | | <input type="checkbox"/> Pakistani |
| | <input type="checkbox"/> White & Asian | | <input type="checkbox"/> Bangladeshi |
| | <input type="checkbox"/> Other | | <input type="checkbox"/> Other |
| Chinese or other ethnic group | <input type="checkbox"/> Chinese | | <input type="checkbox"/> Gypsy/Romany/Irish Traveller |
| | <input type="checkbox"/> Other | | <input type="checkbox"/> Refused |

Specific Needs:

Do you consider yourself to have a disability or other specific need?

Learning Disability:

Physical Disability:

Allergies:

Other - Please Specify:

(Please include details of specific requirements e.g. access needs, information in Braille/large font etc)

Doctor:

Name:	
Address:	
Tel No:	

**School/College/
other:**

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**Is there anything
else you need to
tell us? (E.g.
collection
arrangements,
medical
conditions
dietary
requirements,
etc.)**

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**Contact Details
for parent/
guardian:**

Name:	
Relationship to Child:	
Address	
Telephone Number:	
Are you a CVCH tenant?	Yes <input type="checkbox"/> No <input type="checkbox"/>

***Second
emergency
contact:***

Name:	
Relationship to Child:	
Address	
Telephone Number:	

Photographs

I agree/disagree to my son/daughter having their photograph or videos taken, which will be used to promote, market, and publicise The Pioneer Group/Compass Youth Activities.* (Please delete as necessary).

* These photos will only be used for The Pioneer Group and its subsidiaries and will not be shared with any other organisation. Any personal information provided will only be used for contacting the individual in the event of discussing the given photo consent. These images maybe used for any marketing material, leaflets, website or promotional videos. This is to ensure The Pioneer Group complies with all the provisions of the Data Protection Act 1998 and its Data Protection Policy (available upon request.)

If you no longer wish us to use these materials please contact us immediately.

If you would like to opt out of any of our publicity/communications materials please tick the appropriate box:

- Website**
- Social Media**
- Newsletters**
- Leaflets**
- Promotional Videos**
- External Publications**
- Other**

Young Person Signature: _____ ***Date:*** _____

Parent / Guardian Signature: _____ ***Date:*** _____

Compass Support is a charitable subsidiary of The Pioneer Group which is a Data Controller under the Data Protection Act 1998 ('the Act'). This statement confirms The Pioneer Group's commitment to protect your privacy and to process your personal information in a manner which meets the requirements of the Act.