



BODY OF PERSONS APPROVAL - GROUP PARTICIPANT INFORMATION

This form should be completed by individual dance/theatre schools and returned to the Responsible Organisation, together with a list of the children taking part as requested by the organisation.

DETAILS OF PERFORMANCE / EVENT	
Name of Performance / Event / Competition etc.	
Location	
Date(s)	

DETAILS OF PARTICIPANT GROUP	
Name of participant group (e.g. dance/theatre group)	
Address of Participant group	
Name of Lead Person	
Telephone No(s)	
Email Address	

DETAILS OF CHILDREN				
insert number of children	Male	Female	Other identification*	No of Chaperones / DBS
Age 0 – 4				
Age 5 – 8				
Age 9 – 15				
16 (and reached compulsory school)				

leaving age				
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*not all children and young people will identify as male or female

Local Authority	Number of Children

Chaperones must have licences with them on performance days in the event of an inspection by the Local Authority

DETAILS OF LOCAL AUTHORITY APPROVED CHAPERONES / DBS CHECKED PERSONNEL

Names of Authorised Chaperones present	Date of performance	Expiry date of Chaperone licence and DBS number	Name of Authority which approved chaperone

DETAILS OF ADDITIONAL SUPERVISING ADULTS / Name of Supervising Adult (this can be either the child's own parent or teacher/teaching assistant from the school they would ordinarily attend. State whether Teacher and which school or parent.

Name of Supervising Adult	Capacity known to the child	Name of School if applicable	Name of Authority

- I have obtained, and will have available at the event, a register of the children involved together with a list of emergency contact numbers for each child.
- I have checked chaperone approval licences and will ensure chaperone licences will be available at the event in case of a local authority inspection.
- I have obtained a signed statement of fitness from each child's parent and have informed the responsible organisation of children with any special/medical needs.
- I have read and will adhere to the requirements of the safeguarding instructions provided by the responsible organisation. All relevant safeguarding information has been communicated to chaperones / adult helpers.

Signed: _____

Date: _____

Print Name: _____

Position within organisation: _____