**BODY OF PERSONS EXEMPTION - BAND PARTICIPANTS INFORMATION (YRBBC 2024)**

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| **This form MUST be completed by each participating band. This form will be held with the band at the contest together with all relevant information mentioned at the bottom of page 2 and, if requested, MUST be available for inspection by Kirklees Council Licensing Officer** |

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| **DETAILS OF PERFORMANCE / EVENT**  |
| **Name of Performance / Event / Competition etc.**  |  |
| **Location**  |  |
| **Date(s)**  |  |
| **DETAILS OF PARTICIPANT GROUP**  |
| **Name of Band**  |   |
| **Address of Participant group**  |   |
| **Name of Lead Person**  |   |
| **Telephone No(s)**  |   |
| **Email Address**  |   |
| **DETAILS OF CHILDREN – insert number**  |
| Females  | Males  | No. of Chaperones\*  | No. of parents supervising own child  |
|   |   |   |   |
| **\*SUPERVISION OF CHILDREN** Note that any child not supervised by their own parent must be supervised by a Local Authority approved chaperone or a designated adult with relevant DBS clearance. There must be an appropriate ratio of chaperones to children, 1 chaperone per 12 children. Bands are responsible for the supervision of children in their care **DETAILS OF LOCAL AUTHORITY APPROVED CHAPERONES** Chaperones must have licences with them on performance days in the event of an inspection by the Local Authority  |
| Names of Authorised Chaperones present  |   | Date Present  |   | Expiry date of licence  |   | Name of Authority which approved chaperone  |
|   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |
| **DETAILS OF ADDITIONAL SUPERVISING ADULTS (if applicable)**  |
| Name of Supervising Adult  |   | State whether DBS Cleared or Parent looking after own child  |
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 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.

 Where applicable 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 we are aware 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 / parents.

Signed: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name:

Position within organisation: