PARENTAL PERMISSION FORM - TARGET SHOOTING

Written parental permission is needed before a young person can take part in shooting activities.

DATA PROTECTION: This form is used to collect information about your young person for the purpose of the activity named below, this is to be used by the Section Leaders only. As part of this form we collect personal data about your young person, this detail is required so that we can register them for the activity. This form also collects sensitive (special category) data about your young person, this detail is required so that we can offer additional support if required and keep your young person safe whilst in our care. We may share your personal data in this form with third parties, we do this for activity registration. These third parties are used on the basis that they align with our data privacy policies. We take your personal data privacy seriously. The data you provide to us is securely stored [based on local arrangements] and will be kept for 2 months after the event for any queries that arise before being securely destroyed.

Activity Information

Group/Unit Name								
Date(s) of activity								
Please tick the appropriate	box(es)							
Air Rifle Shooting			(Crossb	ow Sho	oting		
Name of young person:								
Relevent medical information:								
PARENT OR GUARDIAN'S CONSENT I, being the parent/guardian of the young person named above, declare that they are not subject to restriction by virtue of Section 21 of the Firearms Act 1968 (which applies only to persons who have been sentenced to a term of imprisonment or youth custody) and give permission for them to take part in the activities identified above.								
Name:								
Signature:								
Date:								
•			.					

