**Parent / Guardian Details:**

|  |  |
| --- | --- |
| Title: |  |
|  |  |
| First Name: |  |
| Surname: |  |
| Email: |  |
| Mobile Number: |  |
| Other Contact No: |  |
| Address: |  |
| Postcode: |  |

Waterloo Hotshots may wish to contact you for promotional purposes via email from time to time.

|  |  |
| --- | --- |
| Yes | No |
|  |  |

Are you happy for us to do this?

Check as appropriate:

**Secondary Contact Details (in case of emergency):**

|  |  |
| --- | --- |
| Title:  |  |
|  |  |
| First Name:  |  |
| Surname:  |  |
| Email: |  |
| Mobile Number: |  |
| Other Contact No: |  |

Waterloo Hotshots may wish to contact you for promotional purposes via email from time to time.

|  |  |
| --- | --- |
| Yes | No |
|  |  |

Are you happy for us to do this?

Check as appropriate:

**Child’s Details:**

|  |  |
| --- | --- |
| First Name: |  |
| Surname: |  |
| Gender: |  |
| D.O.B: |  |
| School: |  |

|  |  |
| --- | --- |
| Yes | No |
|  |  |

FSM Eligible? Check as appropriate:

Waterloo Hotshots take photographs or videos solely for the purposes of marketing our services to a wider audience. Do you consent for your child to be photographed / videod for this reason?

|  |  |
| --- | --- |
| Yes | No |
|  |  |

Check as appropriate:

 **Equal Opportunities Monitoring:**

|  |  |
| --- | --- |
| Nationality: |  |
| Ethnicity: |  |
| Disability: |  |
| Medical Notes: |  |
| Behavioural Notes: |  |
| SEN: |  |
| Dietary Requirements: |  |

***The information collected herein is solely for Waterloo Hotshots CIC’s internal processes. It will be kept completely confidential and not shared with any third parties, in line with UK data protection legislation.***