



INFORMATION CARD

PERSONAL DETAILS (Child/Young Person)

Surname First Name Date of Birth (DD/MM/YYYY) / /

Sex: Male Female

Ethnicity: White Black/African/Caribbean/Black British Asian/Asian British Other Ethnic Group Mixed/Multiple Ethnic Group Prefer not to say

PARENTS/CARERS CONTACT DETAILS

Primary Contact 1

Name(s) of Parent/Carer Relationship to Member

Address / Postcode

Phone Number Mobile Number Email

Primary Contact 2

Name(s) of Parent/Carer Relationship to Member

Address / Postcode

Phone Number Mobile Number Email

Emergency Contact

Name Relationship to Member Phone Number

MEDICAL DETAILS

Doctor/Surgery Surgery Phone Number

Surgery Address

Details of any medical conditions, allergies or dietary requirements (including any medication required whilst at BB):

Details of any additional needs:

MEMBERSHIP RECORD

Joined Anchors / / Joined Juniors / / Joined Company Section / / Joined Seniors / / Left Company / /

Reason for leaving

FORMS RECEIVED

Joining Form

Completed by

Date (DD/MM/YY)

Annual Information Form

Completed by

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Date (DD/MM/YY)

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PHOTO CONSENT

Parent/carer has indicated consent as follows:

- I am happy for photographs/videos to be taken of my child during BB activities and used at all levels within The Boys' Brigade for publicity, communications and publications including social media.
- I am happy for photographs/videos to be taken of my child during BB activities for use by the local Company only, for publicity, communications and publications including social media. Photos/video will not be used at other levels of The Boys' Brigade.
- I do not wish any photographs/videos to be taken of my child while they are undertaking BB activities.

Updated (DD/MM/YYYY)

OTHER INFORMATION