



# LAMP

Linlithgow Amateur Musical Productions  
*incorporating*



LAMP Children's Theatre

## LAMP Children's Theatre Member Consent Form

<b>Member Name</b>		<b>Date of Birth</b>
<b>Address</b>		<b>Postcode</b>
<b>Contact Mobile No.</b>		
<b>Contact E-Mail</b>		
<b>School Attended</b>		<b>School Year</b>
<b>Emergency Contact</b>  <b>Name and Mobile Telephone</b>		
<b>Relevant Medical Conditions</b> <b>e.g. allergies, medication</b>		

- Linlithgow Amateur Musical Productions incorporating LAMP Children's Theatre take its responsibilities to protect its members personal information seriously. We are compliant with the General Data Protection Regulation (Regulation (EU) 2016/679) and will be fair, lawful and responsible in handling your data. Your personal information will be available to specific committee members during company events including rehearsals, concerts and performances in the case of an emergency. All members are expected to adhere to the Company policies which can be viewed at [www.linlithgow-musicals.co.uk/lamp-policies](http://www.linlithgow-musicals.co.uk/lamp-policies).

- By signing below, you give permission for:

officials and representatives of Linlithgow Amateur Musical Productions incorporating LAMP Children's Theatre to take production and rehearsal photographs and/or videos of which may feature the member and to show these photographs and/or videos for publicity purposes, display front of house for the week of the show, use within the productions programme or to post onto LAMP's social media platforms, in accordance with our Social Media and Safeguarding Policies and Procedures.

executive officials of Linlithgow Amateur Musical Productions incorporating LAMP Children's Theatre to use some personal information to apply for a Body of Persons Performance License Application from relevant Council Education Departments in accordance with The Children (Performances and Activities) (Scotland) Regulations 2014 to allow participation in this production.

emergency treatment to be provided by qualified medical professionals in the event of illness or accident. I give members of the management committee consent to secure all necessary emergency medical care for the above-named member at any LAMP event.

<b>SIGNED</b>	<b>DATE</b>	<b>NAME AND RELATIONSHIP TO MEMBER</b>



linlithgow-musicals.co.uk  
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Affiliated to NODA

