

Activity Information and Parental Permission Form – Target Shooting



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. For further detail please visit our Data Protection Policy [here](#).

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

Activity Information

Group/Unit Name	1 st Westgate-on-Sea Scout Group
Date(s)* of activity	

*Please note this must state specific dates of activity such as individual event, camp, short term series of badge focused programmes.

Please tick the appropriate box(es).

Air rifle shooting		Air pistol shooting		Clay pigeon shooting	
Full-bore rifle shooting		Small-bore rifle shooting		Muzzle-loaded shooting	
Crossbow shooting		Airsoft			

Parent or Guardian's consent

Name of young person	
Relevant medical information	

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 or any other law restricting the use of guns (which applies to persons who have been sentenced to a term of imprisonment, youth custody or suspended sentence) and give permission for them to take part in the activities identified above.

Name of parent/guardian	
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Signature	
Date	