In order to maintain our membership details and to conform to the GDPR please complete this membership form. Without this information we cannot contact you to take part in any Cave Player events.

NAME:

ADDRESS:

PHONE:

EMAIL:

**EMERGENCY CONTACT DETAILS:**

NAME:

RELATIONSHIP TO MEMBER:

CONTACT NUMBER/S:

(PLEASE ANSWER FOLLOWING WITH AN **X** IN THE BOX)

**IN WHAT CAPACITY WOULD YOU LIKE TO BE INVOLVED IN CAVE PLAYERS?**

ON STAGE BACK STAGE LIGHTING COSTUME

SET DECORATION PROPS FRONT OF HOUSE

**WHAT IS YOUR PREFERRED WAY TO RECEIVE AND REPLY TO CAVE PLAYERS’ INFORMATION?**

POST PHONE TEXT/WHATSAPP EMAIL WEBSITE FACEBOOK

**ANY MEDICAL CONDITIONS WE SHOULD BE AWARE OF?**

N Y IF YES PLEASE DETAIL BELOW

**ANY DISABILITY WE SHOULD BE AWARE OF?**

N Y IF YES PLEASE DETAIL BELOW

**DO ANY REASONABLE ADJUSTMENTS NEED TO BE MADE?** (Please be aware that our backstage space is very limited so will not accommodate major adjustments.)

N X Y IF YES PLEASE DETAIL BELOW

**ANY ALLERGIES WE SHOULD BE AWARE OF?**

N Y IF YES PLEASE DETAIL BELOW

**Whilst we try to take care of people when in the WI Hall and North Cave Village Hall for rehearsals and performances, we cannot be responsible for the safety of people outside the halls. If required, do you have a responsible adult to bring and collect you from s and performances?**

N Y N/A

**Do we have permission to use photographs of you on our website or social media pages?**

N Y

**If it applies, have you and your child read the Cave Players’ Behaviour Policy (on the website)?**

N Y

**Have you read the Cave Players’ Constitution 2018 (on the website)?**

N Y

**In line with GDPR do Cave Players have your consent to contact you regarding the following?**

**Future Productions**

N Y

**Social Events**

N Y

**NAME (PRINT) SIGNATURE**

**PLEASE INDICATE IF PARENT/GUARDIAN SIGNING FOR PERSON UNDER 16 YEARS OF AGE**

N Y RELATIONSHIP TO JUNIOR MEMBER

**DATE**