

# Registration Form

If you need any help in completing this form, please call the BUILD office on 01603 618029

## About you

Name:

Date of Birth:

Address:

Telephone Number (home):

Mobile Number:

Email Address:

I will need to bring a personal carer / supporter with me to BUILD events: Yes:  No:

I would like to get my information from BUILD by Email:  **OR** by Post:

I am happy for BUILD to use photos of me for marketing and publicity: Yes:  No:

I would like to know more about the BUILD membership scheme: Yes:  No:

## Emergency contact details

Name:

Relationship to you:

Telephone:

## Keeping you safe

When you go on a BUILD activity, you can be confident that our staff and volunteers will help you to stay safe and have a great time. We will make sure that you are safe in crowds, near water or traffic, and will help you with things like understanding money or reading menus. If you have **extra** needs that we should know about, please tell us here.

I use mobility aids most of the time (please specify)

I have epilepsy / regular seizures

I have a severe allergy that would need intervention

I have an illness or condition that may be dangerous to others

I have a sensory impairment that means I need extra support

I have an extra need not listed here (please specify)

**If you have ticked any of these statements, we will contact you to discuss them.**

## Declaration

In line with the Data Protection Act 2018:

I confirm that to the best of my knowledge, the information given is correct and that I will advise BUILD of any changes.

I understand that information given on this form will be held in electronic and paper form for use by BUILD staff, and BUILD volunteers, and will not be shared with anyone else without my permission.

I give my explicit consent to BUILD holding this information for use in my involvement with BUILD.

I understand I can request this information to be deleted from your records at any time.

A copy of the BUILD Charity Privacy Policy is available on our website or a paper version on request.

**Signed:**

**Date:**

## Please complete and return this form to:



BUILD Charity  
Church House  
Church Alley  
Redwell Street  
Norwich  
NR2 4SN

If you have any questions please get in touch by calling 01603 618029, or email: [admin@buildcharity.co.uk](mailto:admin@buildcharity.co.uk)

