**BODY OF PERSONS EVENTS/FESTIVAL APPLICATION FORM**

**(S.37 (3) (b) Children & Young Persons Act 1963)**

**CEREDIGION COUNTY COUNCIL**

**Please complete this form and the ‘Contract of Agreement’ and return them together with a copy of the organisations Child Protection Policy to:**

**Education Safeguarding Team, Canolfan Rheidol Llanbadarn ,**

**Aberystwyth. SY23 3GJ or Electronic copies and also be emailed to catrin.petche@ceredigion.gov.uk**

*N.B The applicant below MUST be the same person who signs the ‘Contract of Agreement’*

**SECTION 1 ORGANISATION DETAILS**

|  |  |
| --- | --- |
| **Name of Organisation** |  |
| Registered Address of  Organisation |  |
| Tel No (s) |  |
| Email |  |

|  |  |
| --- | --- |
| **Name of Applicant\*** |  |
| Position in Organisation |  |
| Address if different |  |
| Tel. No (s) |  |
| Email |  |

**\*N.B The applicant must have authority to agree, on behalf of the organisation, to any terms and conditions set out by the local authority.**

**SECTION 2 DETAILS OF THE EVENT**

|  |  |
| --- | --- |
| Title of Event/Festival |  |
| Address of Venue |  |
| Date(s) of event |  |
| Time (s) of performance (s) |  |
| Description of the  performance for which the  approval is requested. |  |
| The organisation must provide the numbers of individual children taking part on each of the dates, and locations of the Event/Festival performances. This can be done by providing an electronic copy of the published festival/event programme.  The organisation must ensure that each group performing at the event provides them with the details of their children, chaperones and DBS checked supervising Adults (Group Participation Information Form). The organisation must submit all their details to Ceredigion Council Education Safeguarding Team at least 21 days prior to the first date of event. | |

**SECTION 2 SAFEGUARDING ARRANGEMENTS**

|  |  |
| --- | --- |
| **Name or Person**  **responsible for Child**  **Protection** |  |
| Position in Organisation |  |
| Address |  |
| Tel. No (s) |  |
| Email |  |

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| --- | --- | --- |
| Does the organisation have a child protection policy and child protection procedures? (Please include with your application) | | **YES / NO** |
| How do you ensure your child protection policy is followed throughout your organisation? |  | |
| What safeguarding training do you provide to those in your organisation who come into contact with children? |  | |
| What arrangements do you have in place for the supervision of children at rehearsals and performances? |  | |
| Have you previously made a BOPA application to other local authorities?  *If yes, which authorities?* |  | |
| Has your organisation ever had a BOPA refused? |  | |

|  |
| --- |
| **Declaration of compliance with The Children (Performances & Activities) ( Wales) (Regulations) 2015**   1. I confirm that no payment in respect of taking in the performance (s), other than offsetting expenses, will be made to any young person or to anyone on their behalf such as a parent/carer/agent. 2. I confirm that the child protection policy and procedures for the organisation is attached. 3. I confirm that no child will be allowed to perform unless fit to do so. All parents, carers and/or group organisers will be responsible for ensuring their child (ren) are fit and that their health will not suffer by taking part in the performance(s). 4. I confirm that the Organisation agrees to the terms as set out on the ‘Contract of Agreement’ and ‘Guidance’ attached. 5. I confirm that no child of compulsory school age requires any absence from school to take part in the event/festival unless by prior agreement of Ceredigion Education Safeguarding Team   Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**BODY OF PERSONS APPROVAL – EVENTS/FESTIVALS**

**CONTRACT OF AGREEMENT**

**(S.37 (3) (b) Children & Young Persons Act 1963)**

|  |  |
| --- | --- |
| **Name of Organisation** |  |
| **Address of Organisation** |  |
| **Telephone No:** |  |
| **Email** |  |
| **Name and address of the**  **Person responsible for the production** |  |
| **Position in**  **organisation** |  |

The above organisation has applied to Ceredigion Council to be approved as a Body of Persons under s.37 Children& Young Persons Act 1963. IF approved, the organisation would be exempted from the need to apply for individual licences for children to perform within Ceredigion Council’s boundary.

If approved, the organisation agrees to adhere to the following conditions:

1 The organisation will provide Ceredigion Council Education Safeguarding Team with details of each performance/rehearsal including dates, times and locations, together with the details (number, age group & gender) of all children taking part, at least 21 days in advance of the first performance unless the Education Safeguarding Team has agreed alternative arrangements. NB this may be by providing a copy of the festival programme and Group Participation form.

2 The organisation agrees to comply with all relevant aspects of the Children (Performances & Activities) (Wales) (Regulations) (Wales) 2015

3 The organisation will ensure that an appropriate number of Local Authority approved chaperones/DBS Checked Volunteers as agreed by the Local Authority are engaged to care for the children, having specific regard to their sex, age and ability ensuring that each child is supervised at all times at each performance and appropriate rehearsal.

4 A risk assessment will be carried out in respect of each place of performance.

5 A first aider is present at each place of performance.

6 The organisation agrees to any authorised officer of the local authority having unrestricted access whilst any dress or technical rehearsal or performance is taking place at any venue that the organisation uses for such purposes.

7 The organisation will provide a written Child Protection Policy and Procedures to the local authority (copy attached to the application). A statement of the organisation’s commitment to protecting children must be displayed prominently at each venue.

8 The organisation will obtain confirmation from the relevant group participating that each group holds an up to date statement of fitness from the parent of each of the children.

9 The organisation will ensure that a list of emergency contact details in respect of each child including any medical issues or additional needs is securely held and is available at the place of performance.

10The organisation will ensure signing in and out sheets are completed for each performance.

11 No payment will be made to the child or anyone else, on behalf of the child.

12 No Child will be absent from school to take part in a performance given under a body of persons agreement, unless by prior agreement with Ceredigion Council Education Safeguarding Team who will consider the implications of the Education (Pupil) (Registration) (Wales) Regulations 2010 Regulation 7

**Failure to comply with any of the above agreements or conditions is likely to result in the Body of Persons exemption being revoked with immediate effect.**

Failure to comply with Children & Young Person Act 1963 s.37 and The Children (Performances and Activities) (Wales) (Regulations) 2015 is a criminal offence, which in conviction carries a maximum penalty of £1,000 or three months imprisonment or both, for each offence.

In signing this declaration you agree to the terms and conditions above.

Signed ………………………………………………………………………………………………..

Print Name …………………………………………………………………………………………...

Position in Organisation …………………………………………………………………………….

Date …………………………………………………………………………………………………..

Tel Number ………………………………………………………………………………………….

Email ………………………………………………………………………………………………….

**…………………………………………………………………………………………………………**

**For Office Use Only**

Signed on behalf of Ceredigion Council ……………………………………………………………….

Date …………………………………………………………………………………………………

Position held: Education Safeguarding Officer

**BODY OF PERSONS APPROVAL**

**GROUP PARTICIPATION INFORMATION**

This form is to be completed by the respective group participating in the names event and should be **returned to the responsible event organiser** prior to the children taking part.

**Details of production:**

|  |  |
| --- | --- |
| **Name of Event** |  |
| **Venue** |  |
| **Name of participating group**  **(Dance, theatre, school etc)** |  |
| **Address of participating group** |  |
| **Name of lead person(s)/principle** |  |
| **Contact Phone number** |  |
| **Email** |  |

**Details of each performance (entry) and children (insert number of children)**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date of Performance | Name of performance/entry | Number of  Male Performers | | | Number of Female Performers | | | No of chaperones present |
| 0-4 yrs | 5-8yrs | 9-16yrs | 0-4yrs | 5-8yrs | 9-16yrs |
| **Eg: 5/2/19** | Dancing Feet | 0 | 4 | 2 | 0 | 8 | 5 | 4 |
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**Details of Local Authority Approved Chaperones**

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| --- | --- | --- |
| Name of Authorised Chaperone | Expiry date of licence | Name of Authority approving chaperone |
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**Details of additional supervising adults:**

**(Enhanced DBS checked helpers who are in addition to approved chaperones, child’s own parent or academic school teacher who normally provides the child’s education)**

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| --- | --- | --- | --- |
| Name of Supervising adult | Date present | Parent/Teacher  (as defined above) | Enhanced DBS Certificate checked by group lead  (Y / N) |
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**Continue on an additional sheet if required.**

**Additional information (Please use an additional sheet if required)**

* Travel arrangements – How will the children travel to and from the venue and what is the approximate length of travel time?
* Overnight accommodation – Will any child be required to stay away from home overnight, and if so what are the accommodation and supervision arrangements?
* Additional safeguarding

**To be complete by the participating group’s principle/leader and returned together with children and Chaperone/Supervising adult details.**

I have obtained and will have available at the event, a register of all children involved, together with a list of emergency contact numbers for each child.

I have checked all the listed chaperones approval licences and will ensure that all chaperones approved will be available for display or presentation at the event

I have obtained a signed statement of fitness from each child’s parent and have informed the responsible organisation of children with specific any medical requirements.

I have read and will adhere to the requirements of the safeguarding instructions provided by the responsible (event) organisation. All relevant safeguarding information and instructions have been communicated to the Chaperones/adult helpers.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position within organisation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_