



ALL EVENTS IN
2019



Youth Group 2019 Registration Form

Thank you for registering as a NOISE DEVIZES Youth Group. Please note:

- Main Group Leader must be 18+ years and have an up to date CRB/DBS check
- There must be a ratio of **at least one adult to six under 18s**
- It is the responsibility of the Group Leader to obtain parental/carer consent, whether written or verbal, for each under 18 to be taking part in The Noise Devizes weekend as a part of their group, using the Noise Devizes Under 18 registration form (available from www.stjamesdevizes.org or from St James' church office)
- Please read and sign the **IMPORTANT** Youth Group Leader Volunteer Declaration
- Please photocopy form and use as necessary

MAIN GROUP LEADER details

Group Leader Name				Male/Female
Phone		Email address		
Address & postcode				
Date of birth		Church / School Group		
Days volunteering (please tick all applicable)	BIG Noise w/e Saturday 5 th October <input type="checkbox"/>		Sunday 6 th October <input type="checkbox"/>	
T-shirt size	Already got one <input type="checkbox"/> Need one <input type="checkbox"/> Approximate chest size			
Relevant skills / qualifications (inc. first aid, CRB/DBS)				
medical information &/or information that project risk assessor should be aware of.				
Signature *:				
Child Protection Declaration Have you ever been charged with or convicted of a criminal offence or are you at present the subject of criminal investigations? (The disclosure of an offence may not prohibit your application)				YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever been involved in court proceedings concerning a child for whom you have parental responsibility or had an offer to work with children/young people declined? If you have answered yes to any of the above, then we will contact you to discuss the matter confidentially				YES <input type="checkbox"/> NO <input type="checkbox"/>

Small print *: in signing this form you are agreeing to the Volunteer Declaration. Copies are available overleaf, or online at www.stjamesdevizes.org or hard copies can be obtained from St James' Church.

ADDITIONAL GROUP LEADER details

Group Leader Name				Male/Female
Phone		Email address	Phone	
Address & postcode				
Date of birth		Church / School Group		
Days volunteering <i>(please tick all applicable)</i>	BIG Noise w/e Saturday 5 th October <input type="checkbox"/>		Sunday 6 th October <input type="checkbox"/>	
T-shirt size	Already got one <input type="checkbox"/> Need one <input type="checkbox"/> Approximate chest size			
Relevant skills / qualifications (inc. first aid, CRB/DBS)				
medical information &/or information that project risk assessor should be aware of.				
Signature *:				
Child Protection Declaration Have you ever been charged with or convicted of a criminal offence or are you at present the subject of criminal investigations? (The disclosure of an offence may not prohibit your application) Have you ever been involved in court proceedings concerning a child for whom you have parental responsibility or had an offer to work with children/young people declined? <i>If you have answered yes to any of the above, then we will contact you to discuss the matter confidentially</i>				YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>

Small print *: in signing this form you are agreeing to the Volunteer Declaration. Copies are available overleaf, or online at www.stjamesdevizes.org or hard copies can be obtained from St James' Church.

Suggested annual volunteer donation: £5 per person (£3 under 18) which includes contribution towards costs of hiring tools and the Noise t-shirt. Please send this form with a cheque (payable to St James Southbroom PCC) or cash to:
The Noise Devizes Administrator, St James' Church Office, Church Walk, Devizes SN10 3AA

FIRST YOUNG PERSON details

Young person name			Male/Female
Address & postcode			
Date of birth		Parent/Carer consent obtained? <input type="checkbox"/>	
Days volunteering <i>(please tick all applicable)</i>	BIG Noise w/e Saturday 5 th October <input type="checkbox"/>	Sunday 6 th October <input type="checkbox"/>	
T-shirt size	Already got one <input type="checkbox"/> Need one <input type="checkbox"/> Approximate chest size		
Any medical/dietary information/needs (e.g. medical conditions, allergies, medication, inhalers etc). Please give appropriate details			

SECOND YOUNG PERSON details

Young person name			Male/Female
Address & postcode			
Date of birth		Parent/Carer consent obtained? <input type="checkbox"/>	
Days volunteering <i>(please tick all applicable)</i>	BIG Noise w/e Saturday 5 th October <input type="checkbox"/>	Sunday 6 th October <input type="checkbox"/>	
T-shirt size	Already got one <input type="checkbox"/> Need one <input type="checkbox"/> Approximate chest size		
Any medical/dietary information/needs (e.g. medical conditions, allergies, medication, inhalers etc). Please give appropriate details			

THIRD YOUNG PERSON details

Young person name			Male/Female
Address & postcode			
Date of birth		Parent/Carer consent obtained? <input type="checkbox"/>	
Days volunteering <i>(please tick all applicable)</i>	BIG Noise w/e Saturday 5 th October <input type="checkbox"/>	Sunday 6 th October <input type="checkbox"/>	
T-shirt size	Already got one <input type="checkbox"/> Need one <input type="checkbox"/> Approximate chest size		
Any medical/dietary information/needs (e.g. medical conditions, allergies, medication, inhalers etc). Please give appropriate details			

FOURTH YOUNG PERSON details

Young person name		Male/Female
Address & postcode		
Date of birth		Parent/Carer consent obtained? <input type="checkbox"/>
Days volunteering <i>(please tick all applicable)</i>	BIG Noise w/e Saturday 5 th October <input type="checkbox"/>	Sunday 6 th October <input type="checkbox"/>
T-shirt size	Already got one <input type="checkbox"/> Need one <input type="checkbox"/> Approximate chest size	
Any medical/dietary information/needs (e.g. medical conditions, allergies, medication, inhalers etc). Please give appropriate details		

FIFTH YOUNG PERSON details

Young person name		Male/Female
Address & postcode		
Date of birth		Parent/Carer consent obtained? <input type="checkbox"/>
Days volunteering <i>(please tick all applicable)</i>	BIG Noise w/e Saturday 5 th October <input type="checkbox"/>	Sunday 6 th October <input type="checkbox"/>
T-shirt size	Already got one <input type="checkbox"/> Need one <input type="checkbox"/> Approximate chest size	
Any medical/dietary information/needs (e.g. medical conditions, allergies, medication, inhalers etc). Please give appropriate details		

SIXTH YOUNG PERSON details

Young person name		Male/Female
Address & postcode		
Date of birth		Parent/Carer consent obtained? <input type="checkbox"/>
Days volunteering <i>(please tick all applicable)</i>	BIG Noise w/e Saturday 5 th October <input type="checkbox"/>	Sunday 6 th October <input type="checkbox"/>
T-shirt size	Already got one <input type="checkbox"/> Need one <input type="checkbox"/> Approximate chest size	
Any medical/dietary information/needs (e.g. medical conditions, allergies, medication, inhalers etc). Please give appropriate details		

SEVENTH YOUNG PERSON details

Young person name			Male/Female
Address & postcode			
Date of birth		Parent/Carer consent obtained? <input type="checkbox"/>	
Days volunteering <i>(please tick all applicable)</i>	BIG Noise w/e Saturday 5 th October <input type="checkbox"/>	Sunday 6 th October <input type="checkbox"/>	
T-shirt size	Already got one <input type="checkbox"/> Need one <input type="checkbox"/> Approximate chest size		
Any medical/dietary information/needs (e.g. medical conditions, allergies, medication, inhalers etc). Please give appropriate details			

EIGHTH YOUNG PERSON details

Young person name			Male/Female
Address & postcode			
Date of birth		Parent/Carer consent obtained? <input type="checkbox"/>	
Days volunteering <i>(please tick all applicable)</i>	BIG Noise w/e Saturday 5 th October <input type="checkbox"/>	Sunday 6 th October <input type="checkbox"/>	
T-shirt size	Already got one <input type="checkbox"/> Need one <input type="checkbox"/> Approximate chest size		
Any medical/dietary information/needs (e.g. medical conditions, allergies, medication, inhalers etc). Please give appropriate details			

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The Noise Devizes Administrator, St James' Church Office, Church Walk, Devizes SN10 3AA



The Noise Devizes

St James' Church

Church Walk

Devizes SN10 3AA

01380 723891

Email: admin@st-james-devizes.org.uk

www.thenoisedevizes.org.uk

Youth Group Leader Volunteer Declaration

- I agree to participate in voluntary assistance for The Noise Devizes (which is a community outreach activity of St James' Church, Devizes), in Devizes and all locations in connection with the events as initiated by The Noise Devizes organisers.
- I understand that The Noise Devizes organisers will do their utmost to ensure the safety and security of all delegates and staff members at all times during the events. I agree to comply with any reasonable request given by The Noise Devizes organisers regarding Health & Safety.
- I understand that all activities during this event are carried out at my own risk and accept all responsibility.
- I understand that although all projects have been assessed, The Noise Devizes cannot guarantee that all NOISE DEVIZES Youth group projects are 'child-safe'. Therefore, I am fully responsible for the safety, wellbeing, behaviour and actions of the young people who are part of my NOISE DEVIZES Youth group, and for assessing which parts of each project are safe and appropriate for each of the young people in my care depending on their ages and abilities. I understand that the young people who are part of my NOISE DEVIZES Youth group remain my responsibility at all times during the time they are volunteering with The Noise Devizes.
- I give permission for the young people in my team to participate in Community Project work, including gardening, painting, and all other work which is assessed by Noise Devizes project leaders.
- I authorise 'The Noise Devizes' first aiders to administer emergency care/treatment, as required, to those young people in my care, until medical assistance is available.
- I understand that it may be necessary to arrange transport in individual project members' cars. Child Protection policies will be adhered to in these situations.
- I give my consent for any member of my Youth group to be filmed and/or photographed and I authorise The Noise Devizes organisers to use such film/photographs in presentations. St James' Church, Devizes operates a safeguarding policy. Copies of St James' safeguarding policy and procedures are available to view online at www.thenoisedevizes.org.uk or www.st-james-devizes.org.uk.
- I agree, if considered appropriate, to co-operate in any risk assessment deemed necessary for me to take part in The Noise Devizes. I declare that I have read and understood the Safeguarding information (on the next page) and agree to abide by the procedures laid down. I confirm that the submitted information is correct and complete.
- I agree to all my Youth group volunteer details being kept on a database for purposes of The Noise Devizes.
- I have received consent from each young person's parent or carer for them to be taking part in The Noise Devizes and all related activities and to be under my care and supervision at all times.
- I have read and accept the above terms.

Signature of Group Leader	
Signature of additional Group Leader	
Date	



SAFEGUARDING INFORMATION

Dealing with an Allegation

The most important consideration for workers must be to safeguard and promote the welfare of the children and young people with whom they come into contact. Any allegation of abuse must be taken seriously and The Noise Devizes Project Leader has a duty to report it to the relevant statutory agencies, in consultation with The Noise Devizes Safeguarding Co-ordinator.

Abuse falls into four categories, which can be defined as follows:

Physical Injury: Any injury to a child, young person or vulnerable adult caused by a family member or other person with responsibility for their care.

Neglect: A failure to meet a child, young person or vulnerable adult's basic needs for food, warmth, protection and care.

Emotional Abuse: The persistent, severe emotional ill-treatment or rejection that severely affects the emotional and behavioural development of a child, young person or vulnerable adult.

Sexual Abuse: The use of a child, young person or vulnerable adult to meet an adult's sexual needs.

If a child, young person or vulnerable adult begins to tell a worker about abuse it is vital that you do the following:

- Never promise to keep it a secret and not tell anyone.
- Listen carefully but do not ask questions.
- Reassure the child, young person or vulnerable adult that they have done the right thing by telling someone.
- Pass the information immediately to your Team Leader.
- Write up what has been told as soon as possible using the child, young person or vulnerable adult's own words to describe the abuse.

Your Team leader will then report to The Noise Devizes Project Leaders. From there the Safeguarding Co-ordinator will be involved and St James' Church will take up the matter from there. It is important to remember that it is not the responsibility of The Noise Devizes or St James' Church to investigate the truth of any allegation. This is the responsibility of the Police, Social Services and the NSPCC.

Please note, **what has been disclosed is very confidential and should only be shared with others on a strictly need-to-know basis.** The first person to be told of the abuse may be asked to provide a statement for the police.

After telling of abuse, a child, young person or vulnerable adult can be distressed, frightened and worried about what will happen next. They should be reassured that they have done the right thing and not left on their own.

The best interest of the child, young person or vulnerable adult and the need for the abuse to stop comes before the interests of the organisation or the abuser.