**BIKEABILITY PARTICIPANT CONSENT FORM**

**A parent or guardian over the age of 18 must complete all sections of this form and hand it back to the school. Failure to so will result in your child being unable to participate in the course.**

Please read and complete all sections before returning the consent slip to your child’s school.

|  |  |
| --- | --- |
| Full Name of Child: |  |
| School: |  | School Year: |  |
| Are there any medical/ educational needs? |  |

|  |  |  |
| --- | --- | --- |
| I have received, read, and understand the pre-information for parents. | YES [ ]  | NO [ ]  |
| I agree to allow my child to take part in cycle training which may include being take off-site. | YES [ ]  | NO [ ]  |
| My child can already ride a bike **unaided** without the assistance of an adult or stabilisers. | YES [ ]  | NO [ ]  |
| My child’s bike is roadworthy and I understand that if it is not, this may result in my child being unable to participate. | YES [ ]  | NO [ ]  |
| I understand that if my child’s ability or behaviour is deemed unsuitable, they will be withdrawn from the course. | YES [ ]  | NO [ ]  |
| I agree that my child will wear a helmet for the duration of the course. | YES [ ]  | NO [ ]  |
| I consent to the Bikeability instructor ‘adjusting’ my child’s helmet if required, however I confirm they are not responsible for the physical condition or appropriate fitting of the helmet. | YES [ ]  | NO [ ]  |
| I agree that Lincs Inspire will not be held liable for any injury or loss / damage to participant’s cycles or belongings. | YES [ ]  | NO [ ]  |
| I agree to encourage my child to practice between each session and after the completion of training. | YES [ ]  | NO [ ]  |
| I authorise emergency treatment to be administered, if necessary, during the activity by appropriate person/people. | YES [ ]  | NO [ ]  |

**Consent**

I confirm that I have answered the above accurately and to the best of my knowledge.

|  |  |
| --- | --- |
| Print Name (parent/guardian): |  |
| Signed (parent/guardian): |  | Date: |  |

**Marketing Consent**

Lincs Inspire may take photographs or videos of pupils participating in Bikeability courses for marketing purposes such as, but not limited to, promotional leaflets and posters, promotional videos on social media and the Lincs Inspire website.

|  |  |  |
| --- | --- | --- |
| Do you consent to your child being photographed / videoed for marketing purposes | YES [ ]  | NO [ ]  |
| Print Name (parent/guardian): |  |
| Signed (parent/guardian): |  | Date: |  |

**Data** **Retention**

Lincs Inspire collects information including personal data for the purpose of delivery and monitoring of training, as well as reporting to funding partners. Where data is shared with funding partners, this will be anonymised.

|  |  |  |
| --- | --- | --- |
| I understand that pupil data will be collected and used to support the delivery and monitoring of the training. | YES [ ]  | NO [ ]  |
| I understand that data collected for the purpose of reporting to funding partners will be anonymised | YES [ ]  | NO [ ]  |
| I understand that the data provided in this form will be retained securely by Lincs Inspire in accordance with its Data Protection and Data Retention policies.  | YES [ ]  | NO [ ]  |
| Print Name (parent/guardian): |  |
| Signed (parent/guardian): |  | Date: |  |

*(For further information, please visit:* [*https://www.lincsinspire.com/enterprise/Privacy*](https://www.lincsinspire.com/enterprise/Privacy) *and* [*https://bikeability.org.uk/privacy-policy/*](https://bikeability.org.uk/privacy-policy/) *)*