

Event Briefing
National Conference: 6th – 8th April 2021

Location: Online

When: 6th – 8th April 2021

Content

At National Conference, students and officers from across Scotland, Wales, Northern Ireland and England will come together to focus on the next steps of our [#StudentsDeserveBetter](#) campaign and moving to fight for a new vision for education, alongside building our [#DecoloniseEducation](#) campaign.

Safeguarding

All delegates are given access to the online safeguarding chat functionality that they access throughout the duration of the event.

Code of behaviour

We expect all delegates to adhere to all our event policies, including our equal opportunities policy while participating in the event. We also expect delegates to read and follow NUS' code of conduct at all times. Any breach of these policies will result in delegates being asked to leave the event. The full policies can be found on NUS Connect or can be forwarded on request.

PARTICIPANT PROFILE & U18 PARENTAL CONSENT FORM FOR NUS EVENTS
NUS event: 6th – 8th April 2021 Online

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|--|--|--|--|--|--|---|--|
| Section 1 | | | | Personal details – Young person (aged 18 and under) and Parent/Guardian | | | |
| Full Name of Young Person | | | Name of Parent/Guardian | | | Young person's date of birth | |
| | | | | | | | |
| Home address including postcode | | | | | | Mobile number for participant on the day | |
| | | | | | | | |
| Daytime landline number of Parent/Guardian | | | Mobile telephone number & email address of parent/guardian | | | Home 'phone number for parent/guardian | |
| | | | | | | | |
| Section 2 | | | | Emergency Contact Details | | | |
| Name of alternative adult who can be contacted in an emergency | | | Phone number(s) for alternative named adult | | | Relationship of this adult to child ie Aunt | |
| | | | | | | | |
| Consent Statement from Parent/Legal Guardian - Please tick each box where you agree | | | | | | | |
| Legal Authority to provide consent | | | | | | | |
| <input type="checkbox"/> I confirm that I have legal responsibility for the young person named above and that I am entitled to give this consent | | | | | | | |
| <input type="checkbox"/> I confirm that to the best of my knowledge, all information provided on this form is accurate, and that I will undertake to advise the organisers of the event of any changes to this information | | | | | | | |
| Consent to participate | | | | | | | |
| <input type="checkbox"/> Having read the event briefing, I agree to the young person named above taking part in this event. | | | | | | | |
| Medical Consent | | | | | | | |
| <input type="checkbox"/> I give my consent that in an emergency situation, the designated person(s) may act in <i>loco parentis</i> , if the need arises for the administration of emergency first aid and/or other medical treatment which in the opinion of a qualified medical practitioner may be necessary. I also understand that in such an occurrence that all reasonable steps will be taken to contact me or the alternative adult which I have named in Section 2 of this form. | | | | | | | |
| <input type="checkbox"/> I confirm that to the best of my knowledge, my child does not suffer from any medical condition other than those detailed by me in the section below | | | | | | | |
| Medical Information/Additional Support Needs – Please detail below any important medical information that the trip organiser needs to know (eg allergies, medical conditions, current medication, special dietary needs, injuries etc.) or additional support/protection needs your child may have. | | | | | | | |
| | | | | | | | |
| I confirm that I have read the event briefing or been made aware of arrangements/expectations concerning | | | | | | | |
| Safeguarding arrangements | | | | Code of behaviour | | | |
| <input type="checkbox"/> I understand that this is a largely adult event with open access, no NUS supervision of delegates & independent movement between venues/activities in a city centre location | | | | | | | |
| <input type="checkbox"/> I understand and agree to the responsibilities which I and my child have in connection with this event and associated arrangements outlined in the event briefing and the event code of behaviour | | | | | | | |
| Signed (Parent/Legal Guardian) | | | Printed Name of Parent/Legal Guardian | | | Date of signature | |
| | | | | | | | |
| Signed (Young Person) | | | Printed Name of Young Person | | | Date of signature | |
| | | | | | | | |
| DATA PROTECTION – In the event of a medical issue or a safeguarding concern arising, the trip organisers may disclose certain information to doctors and/or Police and/or Children's Social Care on a 'need to know' basis. | | | | | | | |