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**3k Canoe Challenge!**

**Sponsored OCD Action event (sponsorship optional)**

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Contact information
 OCD Action office: 02072535272 | Trish (Youth and Young Adults Manager): trish@ocdaction.org.uk | Youth Action Panel: youth@ocdaction.org.uk | Joint Adventures: 015394 49003

**3k Canoe Challenge!**

**Why Canoeing?**

The event will be happening on the **7th of September 2014** in the Lake District. We’ll be meeting at **12:15 pm** at:

**Brown Howe Car Park
Ulverston
LA12 8DW**

(If there is demand, we may be able to put on a mini-bus from Oxenholme Lake District Station to the venue.)

As well as our usual forms there will also be a media consent form asking permission for us to film and take photos of the trip. These may be shown on our website and possibly in our newsletter as well. The reason we are doing this is because we want to show other people that don’t know much about the charity or its event the kind of thing we do.

Of course if you do not give your consent we will not include you in any photos or video footage.

As this is a water based activity, the company have told us they will provide us with wet suites, life vests and any other equipment we may need.

Overall dress code should be sensible shoes, clothing you do not mind getting wet, a change of outfit, and a drink/snack (if you think you might get peckish during the afternoon!). Please make sure you’ve eaten lunch before you arrive.

**Anything Else?**

**Where and When?**

This is a free event! As a charity we will cover the cost of the activities, kit hire etc; however you will need to make your own way there, and we also ask for a deposit of £10 which you will get back when you turn up to the trip, this is manly to ensure you have a place and we can guarantee you will be there.

**How Much?**

**Can I Come?**

This event is aimed under 25s.

Of course parents/ carers are also welcome to come along and certain ages might require this as well as having them on the water with them!

After getting such lovely feedback from our last event, we decided to pick your brains about what to do for the next one. You told us that you wanted to do something outdoors-y...and we listened. All of us on the Youth Action Panel put our heads together and decided on a canoeing challenge!

People then started talking about making this a sponsored event, to help raise money for the new OCD Youth project. Whilst it’s by no means obligatory, sponsorship donations are very welcome, and to make things easier for those who do want to fundraise, we’ve included a sponsorship form and have set up a group Justgiving page for you to use:

**justgiving.com/OCD-event**

**3k Canoe Challenge!**

**About the charity**

OCD Action provides support & information to those affected by OCD, raising awareness of the disorder, & striving to secure a better deal for people with OCD: ocdaction.org.uk

**Please support me in raising funds for OCD Action’s youth project!**

**About me**

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: (if \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
under 18)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OCD Youth is a youth-led initiative by OCD Action that aims to increase awareness and access to support for children, adolescents & young adults with OCD: school.ocdaction.org.uk

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name | Address & Postcode  | Amount | Date |
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**REGISTRATION FORM**

Please return all **three** completed forms, along with £10 deposit, to:

Trish Macleod
OCD Action
Suite 506-507 Davina House
137-149 Goswell Road
London EC1V 7ET

*This form must be completed by the individual (if 18 or over) or the individual’s legal guardian (if under 18).*

For: Lake District 3k Canoeing Challenge

On: 7th September 2014

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of accompanying parent/s (if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact details for attendee: mobile:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent contact (if applicable): mobile:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On Sunday 7th September, young people with OCD are invited to come on a canoeing activity day for a social meet-up. This will be held in the Lake District (Brown Howe, Ulverston LA12 8DW, UK)

OCD Action will be paying for the all activities, supervision and equipment hire, so you just need to get yourself there. You can reach the site by public transport, but it is easier to access by car. Some people will be driving, so it may be worth contacting others and planning travel together.

It is recommended that you wear sensible shoes, clothes that you do not mind getting wet, and a change of outfit (just in case!) It is also recommended that you have lunch beforehand and bring a bottle of water and any snacks you think you might want during the afternoon.

To secure a place on the trip, a refundable deposit of £10 is required, which will be reimbursed on attendance.

All young people should normally be accompanied by a parent/guardian. Those over 16 may attend the event alone, but must indicate this below and get a signature from a parent/guardian.

 **\* Having read the information, I agree to/I give permission for my child to (delete as applicable) take part in the activities described**

**\* I enclose with this letter a cheque/cash (delete as applicable) to the amount of £10, for the refundable deposit**

**\* I/my child will be attending this event alone/with a parent or guardian (delete as applicable)**

**\* I/my child would like to/would prefer not to (delete as applicable) participate in the sponsorship element of this activity to raise funds for OCD Action**

**\* I would/would not like to express interest in mini-bus hire from Oxenholme Lake District.**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name & relationship to attendee (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PHOTOGRAPHY AND FILMING CONSENT FORM**

*This form must be completed by the individual (if 18 or over) or the individual’s legal guardian (if under 18) before photography/video filming takes place.*

Consent/parental consent for use of photographs and film:

* I, (name/legal guardian name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

of (address) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(email)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(tel)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

hereby give permission for OCD Action to take and use photographs and film of me/my child during the OCD Youth event, for publication on OCD Action webpages and print resources, where they may be viewed by the public.

*[only to be completed if consenting on behalf of a child under the age of 18]*

(child/children’s name/s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age of child\_\_\_\_\_\_\_\_\_\_

* I also consent to use of the photos for publicity, marketing, and advertising for OCD Youth project, or for publicity, marketing, and advertising for OCD Action. I agree that the photos/film may be combined with other images, text and graphics and be cropped, altered or modified in any way which OCD Action deems appropriate.

* I consent to the provision of this form and the details within it to OCD Action, and to their storing these on a database.

* I understand that the child’s/children’s name/s will not be given to press or public without my consent. I also understand that I may cancel this permission in writing, and that OCD Action will take all reasonable steps to ensure that the photograph/film is withdrawn from future use.

* I further understand that I shall receive no remuneration for this assistance.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name & relationship to attendee (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*OCD Action values your support and promises to respect your privacy. The data we gather and hold* *is managed in accordance with the Data Protection Act (1998). We will not disclose or share personal information supplied by you without your consent.*

**MEDICAL NEEDS FORM**(must be completed by parent or guardian if attendee under 18)

|  |  |
| --- | --- |
| Day/Date of activity:  | 3k Canoeing Callenge |
| Organisation and venue:  | OCD Action, Coniston (Lake District) |
| Type of activity:  | Water-oriented activity day |

1. Attendee details

|  |  |
| --- | --- |
| Name  |  |
| Home address:  |  |
| Email address: |  |
| Home telephone number: |  |
| Mobile telephone number: |  |
| Date of Birth: |  |

2. Emergency contact details

|  |  |
| --- | --- |
| Name  |  |
| Home address:  |  |
| Email address: |  |
| Home telephone number: |  |
| Mobile telephone number: |  |

3. Medical details

|  |  |
| --- | --- |
| Attendee’s GP |  |
| Address:  |  |
| Email address: |  |
| Contact telephone number: |  |

5. Do you/does your child have any disabilities, medical conditions or allergies that you think OCD Action should know about?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |
| If yes, please provide details and medication information  |
|  |

6. Is there any other relevant information about yourself/your child which you would like to share?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |
| If yes, please provide details: |
|  |

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name & relationship to attendee (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_