



# ROYAL DERNGATE & ARTS LEADERS

Royal & Derngate's **ARTS LEADERS** for young people aged 13-24 is set for another fantastic year and we are looking for even more young people to be part of this award-nominated group.

It's **FREE** to join so that everyone can get involved.

**ARTS LEADERS** is a voluntary opportunity for young people to make a difference to their community by collaborating with professionals and community members to design and deliver social action arts projects that have a positive impact on their town. Past projects have included the much-praised *Mothertongue Tales* storybook and education project, and the *True Colours* LGBTQ+ unity project.

## WHY SHOULD I BECOME AN ARTS LEADER?

There are a lot of benefits to being an Arts Leader, including:

- Being able to design and deliver your own projects
- Working with arts professionals to develop skills and deliver activities
- Gaining valuable project management and arts industry experience
- Gaining a Bronze or Silver Arts Award qualification
- Gaining part of your Duke of Edinburgh Award
- Invites to all *Made In Northampton* press events
- Representing Royal & Derngate at events such as National Theatre Connections Festival, Gala Nights and Fun Palaces
- You get an exclusive free **ARTS LEADERS** t-shirt and hoodie
- It's fun!

## WHAT IS AN ARTS LEADER EXPECTED TO DO?

As an **ARTS LEADER**, you need to:

- Attend weekly sessions on Fridays 5.30pm-7.30pm
- Be committed to making a positive difference to your community through arts activities
- Represent Royal & Derngate at events
- Act as an ambassador and role model for Youth Theatre/Young Company groups and Royal & Derngate
- Take ownership of certain aspects of marketing and promotional material for Creative Learning activities
- Have a positive 'can do' attitude when working with young people, community and professionals

## I WANT TO JOIN – SO WHAT DO I DO NOW?

If you would like to become an **ARTS LEADER**, please fill in the application form attached to this letter and return it to Trudy A Bell, Creative Learning Director, as soon as possible. Maybe you have friends or family who would also like to join but are not Young Company members – that doesn't matter, you don't need to be a member of one of our other groups to be an Arts Leader, so get them to sign up too.

As always, if you have any questions, please do not hesitate to contact Trudy on [trudy.bell@royalanderngate.co.uk](mailto:trudy.bell@royalanderngate.co.uk) or 01604 655740. Remember, there is **no** joining fee.

**That's it – really simple, so join up today!**

# REGISTRATION FORM

## 2019/20

**PLEASE COMPLETE IN BLOCK CAPITALS**

Please attach a recent photo

Your application cannot be processed without it

*(It doesn't have to be an expensive photo booth one!)*

### Participant Information

The young person taking part

<b>Full Name</b>			
<b>Date of Birth</b>	DD / MM / YYYY	<b>Current Age</b>	
<b>Mobile Number</b>			
<b>Email Address</b>			
<b>Postal Address</b>			
<b>Post Code</b>		<b>School/University name (if applicable)</b>	

**Arts Award** – as an Arts Leader you have the opportunity to work towards a Bronze, Silver or Gold Award. Arts Award is a recognised arts qualification that is similar to Duke of Edinburgh Awards. Visit [www.artsaward.org.uk](http://www.artsaward.org.uk) for more information.

<b>Bronze</b>		<b>GOLD</b>	
<b>Silver</b>		<b>NEITHER</b>	

### Further Requirements

Do you have any physical / mental / health requirements (e.g. wheelchair access / asthma / anxiety)?	
Do you have any special educational requirements (e.g. Dyslexia / dyspraxia)?	

### Parent / Guardian's Information *(for our Emergency Contact details)*

It is **ESSENTIAL** that the person named below is available and contactable during rehearsals/workshop time.

<b>Full Name</b>			
<b>Mobile Number</b>			
<b>Alternative Telephone Number</b>			
<b>Email Address</b>			
<b>Postal Address</b>			
<b>Post Code</b>			

## PERMISSIONS AND AGREEMENT

### We expect the following from all parents/guardians:

All Arts Leaders to be dropped off and collected in person from Underground 3 by their parent/guardian, unless the box below is ticked.

Arts Leaders **will not be allowed into the centre of Northampton unaccompanied** on breaks or in between sessions or events (on event days) and we will arrange for them to be supervised by one of our Assistant Practitioners or DBS Arts Leaders, if required, **unless the box below is ticked**. NB: when working on projects led by Arts Leaders, it is important that they are allowed additional freedoms and responsibilities in order to lead effectively.

I am happy for my dependent to arrive/leave the building unaccompanied at the beginning/end of session  
(i.e. to meet me in my car outside) or on breaks during all day rehearsals or in-between shows (on show days)

**Please note;** if you have not agreed to the above option and later change your mind, your dependant will **not** be allowed to do this until the Creative Learning Director has received a letter from you, **stating that you now give your permission**.

### Photographs, video & audio recordings

By ticking below you are giving / not giving Royal & Derngate permission for any photographs, videos or audio recordings taken/recorded at any time during your dependents engagement to be used for marketing purposes, displays, evaluation reports, Arts Award evidence and to enable Arts Leaders to build a portfolio of experiences.

**I agree** for any photographs, video or audio recordings to be used for marketing and archive purposes

**I do not agree** for any photographs, video or audio recordings to be used for marketing and archive purposes

### Let's keep in touch!

By ticking below you are giving / not giving Royal & Derngate permission to contact you (the participant) and your parent/guardian for any future marketing and/or ticket offers and/or engagement opportunities.

Tick here to **opt in** for future communications

Tick here to **opt out** of future communications

By signing below, you give Royal & Derngate permission to update or set-up an account on our Box Office System for the participant & parent/guardian using the information and preferences enclosed.

I have read and agree to the terms and conditions above:

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this form, photo, the Medical Details and Equal Opportunities form to [getinvolved@royalanderngate.co.uk](mailto:getinvolved@royalanderngate.co.uk) or via post to: Creative Learning Director, Royal & Derngate, Guildhall Road, Northampton, NN1 1DP



# ROYAL & DERNGATE ARTS LEADERS

## MEDICAL FORM

First names of participant: \_\_\_\_\_ Surname of participant: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Address of participant: \_\_\_\_\_

### NOTE: THIS INFORMATION WILL BE HELD IN CONFIDENCE

*Northampton County Council require us to store all records for 6 months from the day of the last project. After this date they will be destroyed.*

### Does your dependant suffer from any of the following:

ASTHMA	YES / NO
NOSE BLEEDS	YES / NO
CHEST COMPLAINT	YES / NO
WHEEZING OR HAYFEVER	YES / NO
MIGRAINE	YES / NO
FITS OR FAINTS	YES / NO
BAD PERIOD PAINS	YES / NO
DIABETES	YES / NO
NERVOUS DISORDERS	YES / NO
ANY ALLERGIES	YES / NO
ANY OTHER ILLNESS OR DISABILITY	YES / NO

If YES, please give details:

Doctor: \_\_\_\_\_ Hospital Consultant (if applicable): \_\_\_\_\_

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

Tel No: \_\_\_\_\_ Tel No: \_\_\_\_\_

National Health No: \_\_\_\_\_

Is the participant receiving any medical treatment at present? YES / NO

If YES please give details. Please also give details of any medication they are on:

Has the participant had contact with any infectious illnesses within the last month? YES / NO

If YES please give details:

### IN AN EMERGENCY WE SHOULD CONTACT THE FOLLOWING PERSON:

NAME \_\_\_\_\_ RELATIONSHIP TO PARTICIPANT \_\_\_\_\_

DAYTIME TEL NO. \_\_\_\_\_ EVENING TEL NO. \_\_\_\_\_

### EMERGENCY PERMISSION

*I authorise any of the Royal & Derngate's trained First Aid staff to administer first aid to the participant in the event of an accident. I also give permission for them to be treated by a Paramedic.*

SIGNED \_\_\_\_\_ RELATIONSHIP TO PARTICIPANT \_\_\_\_\_

PRINT NAME \_\_\_\_\_ DATE \_\_\_\_\_

## ONLY 2 PAGES TO GO!

We know that this is a lot to fill out, but we ask for all this information now, so we won't bother you again throughout the year

***Keep going!***

Royal & Derngate aims to establish and maintain an environment, practices and procedures which will ensure that no member of one of our groups/workshops receives less favourable treatment on the grounds of race, religion, belief, colour, nationality, ethnic or national origins, disability, gender, marital status, sexual orientation or age.

To ensure we are responding to our audiences and members we are choosing to monitor ethnic origin, gender and sexual orientation, and would be grateful if you would complete this form to enable us to do this. The information provided will be treated as strictly confidential. It will be used for monitoring purposes within the organisation and will assist us to make decisions in the future. Please note; the categories used are those recommended by the Office of National Statistics and the charity Stonewall.

### Ethnic Origin

#### White

British  Irish  Gypsy / Irish Traveller  Any other white background

#### Mixed

White & black Caribbean  White & black African  White & Asian   
Any other mixed / multiple ethnic background

#### Asian / Asian British

Indian  Pakistan  Bangladeshi  Chinese  Any other Asian background

#### Black/Black British

African  Caribbean  Any other black background

#### Other

Arab  Any other ethnic group  Not known/prefer not to say

### Gender Identity: What best describes your gender?

Female  Male  Non-binary e.g. androgynous  Prefer not to say

Prefer to self-describe:

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### Is your gender identity the same as the sex you were assigned at birth?

No  Yes  Prefer not to say

### Sexual Orientation

Bisexual  Gay Man  Gay Woman / Lesbian  Heterosexual / Straight   
Prefer not to say

### Age (Please tick appropriate age range)

0-19  20-34  35-49  50-64  65+  Prefer not to say

## FINAL FEW QUESTIONS...

If English is your second language, what is your first language?

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Are you entitled to free school meals?

No  Yes  Prefer not to say

Are you entitled to pupil premium support at school?

No  Yes  Prefer not to say

Are you a looked after child?

No  Yes  Prefer not to say

Are you involved in other school-based extra-curricular activities (e.g. clubs)?

If so, please write down what it is you do

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Have you an EHC plan (formally Statements of SEN and Learning Difficulties Assessments)?

No  Yes, if so, please explain on separate sheet  Prefer not to say

Have you a disability and if so, what is the nature of that disability?

Non-disabled  Visual impairment  Hearing Impairment/Deaf  Physical Disabilities   
Cognitive or Learning Disabilities  Mental Health Condition  Other long-term/Chronic Conditions

What school year are you in from September 2019?

Reception  Year 1  Year 2  Year 3  Year 4  Year 5  Year 6   
Year 7  Year 8  Year 9  Year 10  Year 11  Year 12  Year 13   
University Year 1  University Year 2  University Year 3  N/A

### YOU'RE DONE!

**Just a final check that you have:**

Completed all 5 pages of the Registration Form

Attached a photo of yourself

**If that's all complete, then WELL DONE you are ready to submit your application!**

Email your completed application to [getinvolved@royalaldergate.co.uk](mailto:getinvolved@royalaldergate.co.uk)

or post it to **Creative Learning Director, Royal & Derngate, 19-21 Guildhall Road, Northampton, NN1 1DP**