

Application for a Body of Persons Approval

CHILDREN AND YOUNG PERSONS ACT 1963 S.37(3)(b)

North Tyneside Council

Name of Organisation:
Registered Address of Organisation:
Postcode
Tel. No.:
Email address
Name of Applicant* (Mr/Mrs/Miss/Ms):
Position held in the Organisation:
Address:
Postcode:
Tel. No.: Mobile:
Email address
*NB: The applicant must have the authority to agree, on behalf of the organisation, to any terms and conditions set out by the Local Authority.
Performance Details:
Performance Title:
Name & address of Venue:
Postcode:
Dates/times of performance(s):
Description of performance: Please provide a full description of what the children will be required to do
Total number of child performers (across all performances):
Number and age range of boys at each performance:
Number and age range of girls at each performance:

Please provide a breakdown of the number	of children and	how many	chaperones v	will be on	duty in
each dressing room at each performance:					

Perform	ance(s) Da	te/Time:			Performance(s) Date/Time:					
Room No.	No. of children	Gender	Age Range	No. of Chaperones	Room No.	No. of children	Gender	Age Range	No. of Chaperone	
Porform	nance(s) Da	to/Timo:			Porform	nance(s) Date/	Fimo:			
Room	No. of			No. of	Room	No. of		T	No.	
No.	children	Gender	Age Range	Chaperones	No.	children	Gender	Age Range	of Chaperones	
Perform	ance(s) Da	te/Time:			Perform	nance(s) Date/	Гіте:			
Room No.	No. of children Gender Age Rang			No. of Chaperones	Room No.	No. of children	Gender	Age Range	No. of Chaperones	
Performance(s) Date/Time:				Performance(s) Date/Time:						
Room No.	No. of children	Gender	Age Range	No. of Chaperones	Room No.	No. of children	Gender	Age Range	No. of Chaperones	

Please continue on back page if necessary

Name of Person responsible for Child Protection & Safeguarding:
Name of Person responsible for Child Protection & Safeguarding.
Position in Organisation:
Tel Number: Mobile:
rei Number. Wobile.
How regularly do you review your child protection policy (please attach a copy) and how do you communicate it and
ensure that it is followed by everyone involved with the production?
What arrangements do you have in place for the supervision of children at rehearsals and performances?
What are your procedures for checking the suitability of persons who have responsibility for the children and how do
you train them in child protection and child performance legislation? (you may be asked supply evidence)
Are you aware of the fire evacuation procedure for the venue and their policy for dealing with a critical incident?
(please attach copies if available)
Has your organisation ever made BOPA applications to other local authorities?
If "yes", which authorities and dates
Has your organisation ever had a BOPA refused?
If "yes" please give details
How will the children travel to and from the venue?
Are any of the children travelling to the venue from somewhere outside North Tyneside?
If "yes" from where, what is the journey time and what arrangements are in place to transport them to and from the place of performance/rehearsal? Please give details:
nom the place of performance/renearsals. I lease give details.

Declaration of the compliance to *The Children (Performances and Activities) (England) Regulations 2014* for this application for a Body of Persons Licence:

I confirm that no payment in respect of taking part in the performance/s, other than for expenses, will be made to any young person or to anyone on their behalf.

I confirm that no child of compulsory school age requires any absence from school to participate in the production.

I confirm that the organisation has a Child Protection Policy in place.

I confirm that all the **young people's parents/carers** have confirmed that they are fit and that their health/education will not suffer by taking part in the performances.

I confirm that the Organisation agrees to the terms as set out in the "Contract of Agreement" attached.

I confirm that I have the authority to sign this application on behalf of the Organisation.

Signed:	Date:
Full Name:	Position:

Please send completed application form and signed contract to:

Attendance & Placement Service 3rd Floor Quadrant East Cobalt Business Park Newcastle upon Tyne NE27 0BY

Tel: (0191) 6438392

Perform	Performance(s) Date/Time:					Performance(s) Date/Time:			
Room No.	No. of children	Gender	Age Range	No. of Chaperones	Room No.	No. of children	Gender	Age Range	No. of Chaperones

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