



CUMBERLAND COUNCIL

NOTIFICATION OF A PERFORMANCE UNDER BODY OF PERSONS APPROVAL

Name of Venue:	
Name of Production:	
Name of Group:	
Dates and Time of Production: (Please include arrival time, departure time and time of performance)	

Name of Authorised Chaperones Present:	Date Present:	Expiry date of Licence:	Name of Authority Approving Chaperone:

Number of Authorised Chaperones Present per Performance:

DETAILS OF THE CHILDREN INVOLVED IN THE PERFORMANCE

Age	Male	Female	Other Identification*	No. of Chaperones
Age 0-4				
Age 5-8				
Age 9-16 (This includes any child that is 16 and currently in year 11 of secondary school)				

*not all children and young people will identify as male and female

Date:	Signature (Body of Persons):
Name (please print):	
Contact No:	
Address:	

Date:	Signature (Producer):
Name (please print):	
Contact No:	
Address:	

Please email completed form along with the Risk Assessment for the Performance to:

childemployment@cumberland.gov.uk

Please submit this form at least 21 days prior to the first date of the performance.