APPLICATION FOR A BODY OF PERSONS EXEMPTION Taking place within the Hull City Council Boundary

Children and Young Persons Act S.37(3)(b)

Section 1 – Organisation Details

Name of Organisation	
Registered Address of organisation <i>inc. postcode</i>	
Tel. No(s)	
Email address	

Name of Applicant*	
Position in Organisation	
Address if different	
Inc. postcode	
Tel. No(s)	
Email address	

*N.B The applicant must have the authority to agree, on behalf of the organisation, to any terms and conditions set out by the local authority.

Section 2 - Details of performance

If your application is for a yearly term and you have not arranged any performances, please continue to section 3

Performance Title	
Address of Venue	
inc. postcode	
Date(s) of performance(s)	
Time(s) of performance(s)	
Description of the performance	
in respect of which the	
approval is requested.	
Please provide as full a	
description as you can about	
what the children will actually	
be required to do.	

Name of Person responsible for Child Protection and Safeguarding	
Position in Organisation	
Address Inc. postcode	
Tel. No(s)	
Email address	

How do you ensure your child	
protection policy is followed	
throughout your organisation?	
What safeguarding training do	
you provide to those in your	
organisation who come in to	
contact with children?	
What arrangements do you have in	
place for the supervision of the	
children at rehearsals and	
performances?	

Have BOPA applications been	
made to other local authorities?	
If yes, which authorities and dates	
Has your organisation ever had a	
BOPA refused?	
If yes, which authorities	

Declaration of compliance with The Children (Performances and Activities) (England) Regulations 2014

- 1. I confirm that no payment in respect of taking part in the performance(s), other than for offsetting expenses, will be made to any young persons or to anyone on their behalf such as a parent/carer.
- 2. I confirm that the child protection policy for the organisation is attached.
- 3. I confirm that all the young people's parents/carers have confirmed that they are fit and that their health will not suffer by taking part in the performance(s).
- 4. I confirm that the Organisation agrees to the terms as set out in the "Contract of Agreement" and "Guidance" attached.
- 5. I confirm that no child of compulsory school age requires any absence from school to take part in the production.

Applicant Signature: ______

Date: _____

Print Name: ______

Please send completed application form and signed contract to: - Education Welfare Service/Entertainment Licences Room 128, The Guildhall, Alfred Gelder Street, Kingston upon Hull, HU1 2AA