

NOTIFICATION OF A PERFORMANCE UNDER BODY OF PERSONS APPROVAL

Name of Venue:	
Name of Production:	
Name of Group:	
Dates and Time of Production:	

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

DETAILS OF CHILDREN – Insert number of children			
	Male	Female	Other self-identification*
Age 0-4			
Age 5-8			
Age 9-16 (and reached compulsory school leaving age)			
	*not all children or young people will identify as male or female		

Number of Authorised Chaperones Present per Performance =

Date: _____ Signature (Body of Persons): _____

Print Name _____

Address: _____

Contact No: _____

Date: _____ Signature (Producer): _____

Print Name _____

Address: _____

Contact No: _____

Please return completed form to: child.licensing@bury.gov.uk
Telephone: 0161-253 5693