

Application for a Child Performance Licence

Education Welfare Service – Head Office
 Child Employment Section
 Inclusion Support Education Centre
 Perry Common Road, Erdington
 Birmingham B23 7AT
 Tel: 0121 303 5125 Fax: 0121 303 5122

CHILDREN AND YOUNG PERSONS ACT 1963 s.37
The Children (Performances) Regulations 1968
The Children (Performances) (Miscellaneous Amendments) Regulations 1998
The Children (Protection at Work) Regulations 1998
The Children (Performances) Amendment Regulations 2000

Note – It is important that this form, duly completed, should be sent so as to reach the licensing authority **not less than Fourteen days** before the first performance for which the licence is requested, since the licensing authority may otherwise refuse to grant a licence.

Note – Any person who fails to observe any condition subject to which a licence is granted or knowingly or recklessly makes any false statement in connection with an application for a licence is liable to a fine not exceeding level 3 on the standard scale or imprisonment for a term not exceeding three months or both. (Section 40 of the Children and Young Persons Act 1963).

PART 1 (To be completed by the applicant)

("The person responsible for the production of the performance in which the child takes part")

1. I hereby apply for a licence under section 37 of the Children and Young Persons Act 1963 authorising

(insert name of child)

(Tick whichever applicable): - to take part in a performance to take part as a model to take part in paid sport

2. I certify that to the best of my knowledge the particulars contained in the attached Annexe to this part are correct.

3. I attach the following:-

- (a) a birth certificate of the child (or other satisfactory evidence of the child's age);
- (b) two identical prints (un-mounted) of a photograph of the child taken during the six months preceding the date of the application (please print child's name on the reverse of the photographs);
- (c) a copy of the contract, draft contract or other documents containing particulars of the agreement regulating the child's appearance in the performing or regulating the activity for which the licence is requested;
- (d) **if the child is under 14 years of age:** a declaration under section 38(1)(a) or (b) of the Children and Young Persons Act, 1963 (stating that the part he/she is to undertake cannot be taken except by a child of about his/her age);
- (e) part 2 to be completed by parent/legal guardian
- (f) part 3 to be completed by Head Teacher;
- (g) Medical if required

Medicals are required for filming/television work or when open licences are being requested. A medical may also be required for other performances such as theatre work if the child takes part on the maximum number of days in the week allowed (6 consecutive days) and the performance lasts more than a week. (Medical certificate to be issued by a medical practitioner pursuant to Regulation 8 of the Children (Performances) Regulations 1968, or as required by the Licensing Authority under the said regulations.

4. I understand that if a licence is granted to me, it will be granted subject to the restrictions and conditions laid down in the Children (Performances) Regulations 1968 and to such other conditions as the local authority or the licensing authority may impose under the said Regulations.

Applicant's Full Name: Tel No:

Position in Company: Fax No:

Company Name and Address: Email:

Applicant's Signature: Date:

Once complete, please return this application form to:

**Education Welfare Service – Head Office, Child Employment Section, Inclusion Support Education Centre,
Perry Common Road, Erdington, Birmingham B23 7AT**

Tel: 0121 303 5125 **Fax:** 0121 303 5122

NOTE – Please contact our office within 9 days of sending the application to confirm receipt and processing of the form

**ANNEXE TO PART 1 (To be completed by the applicant)
Particulars connected with the performance or activity in which the child is to take part**

1. NAME and NATURE of the PERFORMANCE or activity the licence is required for (see note 1):

Name:

Nature:

2. Description of the child's part (please state clearly if child is taking part in a dangerous performance or if child is performing above ground/stage level):

3. Place of the performance or activity in respect of which the licence is requested (see note 2):

4. The dates and times of the performance or activity for which the licence is requested (or attach a schedule) (see note 3)

5. State name of Local Authority in which the performance/filming taking place

6. (a) Start and finish times of performance or activity in respect of which the licence is required:

Start time:

Finish time:

(b) Anticipated arrival time:

Anticipated departure time:

7. Approximate duration of the child's appearances in the performance activity in respect of which the licence is requested:

(1) Name (title of production) & Nature (theatre, film, TV, commercial, modelling etc) of performance.

(2) This should include all the places at which work on location is scheduled.

(3) A licence specifying the number of days on which a child may perform and the period, not exceeding six months, in which the performance or activity may take place, may be granted only to the British Broadcasting Corporation, the Independent Television Authority, a programme contractor within the meaning of section 1(5) of the Television Act 1964 or a body supplying programmes to such a programme contractor to be broadcast by the Independent Television Authority or in respect of a child taking part in a performance to be recorded (by whatever means) with a view to its use in a film intended for public exhibition.

8. NIGHTWORK – at the discretion of the licensing authority (see note 4)

The amount of night work (if any) for which approval will be sought from this local authority stating:

- (a) the appropriate number of days: (b) the approximate duration on each day:
- (c) the reason for night work

9. EARNINGS

The sums to be earned by the child in taking part in the performance or activity in respect of which the licence is requested

Performance: £ Total: £

10. REHEARSALS

Where a licence is requested for a performance, state the proposed arrangements for rehearsals taking place during the fourteen days preceding the first performance:

Dates of rehearsals:

Location:

Approximate duration:

11. SCHOOL ABSENCE

The days or half days on which leave of absence from school is requested to enable the child to take part in the performance, activity or rehearsals.

- (a) Dates of half day(s)
- (b) Dates of full day(s):

Please ensure Part 3 is completed and returned to our office

12. TUTOR DETAILS – MINIMUM 3 HOURS PER DAY ON SCHOOL DAYS

Proposed arrangements (if any) for the education of the child during the period for which the licence is requested:

- (i) The name and address of the school to be attended:

Name of School:

Address:

OR

- (ii) Details of proposed private teacher:

Name:

Address:

(4) Night Work in Broadcasts or Recorded Performances

The Local Authority may grant a licence for a child to work after permitted hours if they are satisfied that outside scenes, near studios or on location, is essential and that the child's appearance is necessary.

Work After Midnight

If work starts after midnight or cannot be completed before midnight, the Local Authority may grant a licence only:

- if they are satisfied it is impractical to complete work before then;

It is important for the licence holders and chaperones to understand that:

- hours after midnight count as part of performing time allowed on the previous day, before the child again starts work
- if the child works on two consecutive nights they may not do any more night work for at least another week
- work may be done in a studio if the weather does not permit outside work.

12. TUTOR DETAILS CONTINUED

Qualifications:	<input type="text"/>	
Teaching Registration No/DCSF No:	<input type="text"/>	
(b) The place where the child will be taught:	(c) The proposed course of study:	
<input type="text"/>	<input type="text"/>	
(d) The number of other children to be taught by the private teacher at the same time as the child in respect of whom application is made:	<input type="text"/>	
The age and sex of each such child:	<input type="text"/>	
(e) Whether the child is to receive the required amount of education [Regulation 10 (4) (a) or 10 (4) (b)]	<input type="text"/>	
(f) Name of the local authority (if any) which has previously approved the appointment of the private teacher for the purposes of a licence:	<input type="text"/>	

13. CHAPERONE DETAILS – LICENCED OR PARENT/ LEGAL GUARDIAN (REGULATION 12)

Name 1:	<input type="text"/>	Telephone:	<input type="text"/>
Address:	<input type="text"/>	Email:	<input type="text"/>
		Relationship to Child:	<input type="text"/>
Name 2:	<input type="text"/>	Telephone:	<input type="text"/>
Address:	<input type="text"/>	Email:	<input type="text"/>
		Relationship to Child:	<input type="text"/>
The name of the Local Authority (if any), for each of the above which has previously approved their appointment as a Chaperone for the purposes of a licence:			
	Name 1	Name 2	
	<input type="text"/>	<input type="text"/>	
If Teacher acting as chaperone	<input type="text"/>		
Teacher Registration No/DCSF No:	<input type="text"/>		
OR			
CRB Disclosure Certificate No:	<input type="text"/>		

14. OTHER CHILDREN UNDER CHAPERONE'S CARE

The number of other children the Chaperone will be in charge of during the performance:

Age and sex of each child:

15. LODGINGS – (Regulation 13)

The address of the lodgings where the child will live if a licence is granted by reason of which the child has to live elsewhere than at the place where she/he would otherwise live:

Address:

Name of householder:

Number of children who will live in the same lodgings:

16. TRAVEL – (Regulation 15)

Approximate length of time which the child will spend travelling:

(a) to the place of performance, rehearsal or activity:

(b) from the place of performance, rehearsal or activity:

(c) and the arrangements (if any) for transport:

17. OTHER LOCAL AUTHORITY CHILDREN

Name of any other licensing authority to which an application has been made for another child to take part in the performance or activity to which this application relates:

TOTAL number of children in the production:

TOTAL number of Birmingham LA children in the production:

PART 2 (To be completed by the Parent*)

**Includes a guardian or other person who has for the time being the charge or control over the child*

Child's Details

1. Child's Full Name:	<input type="text"/>	2. Date of Birth:	<input type="text"/>
3. Child's Address	<input type="text"/>		

School Details

4. Name and address of school attended by the child	
Head Teacher	<input type="text"/>
School Name	<input type="text"/>
Address	<input type="text"/>
Or if he/she has not attended school, please give details of his/her private teacher	
Name:	<input type="text"/>
Address:	<input type="text"/>
	From:..... To:.....

Previous Licences

5. Particulars of each licence granted by any other local authority during the 12 months preceding the date of this application by any local authority other than the licensing authority to whom this application is made:			
Name of local authority:	<input type="text"/>	Date licence was granted:	<input type="text"/>
Name the performance:	<input type="text"/>	Date of performance:	<input type="text"/>

6. Particulars of each application for a licence made during the 12 months preceding the date of this application and refusal by any local authority other than the licensing authority to whom this application is made, stating in each case: (If applicable please continue on a separate sheet)			
Name of local authority:	<input type="text"/>	Date of the application:	<input type="text"/>
The reasons (if known) for the refusal to grant a licence:			
<input type="text"/>			
Name of local authority:	<input type="text"/>	Date of the application:	<input type="text"/>
The reasons (if known) for the refusal to grant a licence:			
<input type="text"/>			

7. Particulars of each performance for which a licence was not required in which the child took part during the months preceding the date of this application, stating: (if applicable please continue on a separate sheet)

Date of performance: Location:

Nature of performance:

Name of person responsible for the production:

Date of performance: Location:

Nature of performance:

Name of person responsible for the production:

8. Dates (if any) on which the child has been absent from school during the 12 months preceding the date of this application by reason of his/her participation in a performance or activity:

Other Employment

9. Details of any form of employment in which the child is employed during the 28 days preceding the days of the first performance or first activity for which the licence is requested:

(a) Nature of employment:

(b) Name and address of employer:

(c) Telephone number of employer:

(d) Days on which the child is employed:

(e) Times during which the child is employed:

Earnings

10. Particulars relating to the sums earned by the child during the 12 months preceding the date of this application stating:

(a) Whether the sums earned were in respect of performances for which a licence was granted, performances for which a licence was not required or other forms of employment:

(b) The amount of sums earned: (c) The date on which payment was received:

Name:

Address:

Description:

Parent/Guardian Declaration

11.

- ◆ I consent to any filming, photographing or recording of any performance or part performances to which this licence relates, which have been authorised by the licence holder;
- ◆ I support this application for a licence
- ◆ I certify that to the best of my knowledge the foregoing particulars are correct and I understand that if a licence is granted it will be granted subject to the restrictions and conditions laid down in the Children (Performances) Regulations 1968 and to such other conditions as the local authority or the licensing authority may impose under the said Regulations.
- ◆ I confirm that my child is fit to undertake the performance as described in this application, and that it will not put at risk my child's health, welfare or ability to take full advantage of his/her education.

Title (Mr, Mrs, Miss etc)

Full Name (Parent/Guardian)

Address:

Daytime Tel No:

Relationship to child:

Signature:

Date:

Note: Any person who fails to observe any condition subject to which a licence is granted or knowingly or recklessly makes any false statement in or in connection with an application for a licence, is liable to a fine not exceeding level 3 on the standard scale, (currently £1,000) or imprisonment for a term not exceeding three months or both (Section 40 of the Children and Young Persons Act 1963)

Medical Declaration

To be completed by the child's parent/guardian if a Medical Certificate is not required (*please use capitals*).
All sections must be completed. Failure to complete will delay registration.

Child's Details (in full)			
Surname:	<input type="text"/>	Forename(s):	<input type="text"/>
D.O.B	<input type="text"/>	Age:	<input type="text"/>
		Male	<input type="checkbox"/>
		Female	<input type="checkbox"/>
	Please tick		
Address:	<input type="text"/>		
	Postcode:	Tel:	
School:	<input type="text"/>		

Doctor's Name:	<input type="text"/>	Doctor's Tel. No	<input type="text"/>
Address:	<input type="text"/>		
	Postcode:	Tel:	
Surgery stamp if being submitted as a Medical Certificate:	<input type="text"/>		

Child's Employer: (i.e. Theatre Company etc)	<input type="text"/>
Employer's Address:	<input type="text"/>
	Postcode: Tel:
Description of work:	<input type="text"/>

Does your child suffers from, or has previously suffered from any infections or long-term illness of any kind? (e.g. epilepsy, heart trouble, diabetes, back problems, sight of hearing impairments).
YES <input type="checkbox"/>
Please tick appropriate box
NO <input type="checkbox"/>
If you have answered "YES" please give as fully as possible including the name of any medical conditions.
<input type="text"/>
(This information will not necessarily prevent your child from being issued a licence).

It may be necessary for your child to be called for a medical. You should always accompany your child if a medical is required. **Always contact the clinic if you cannot attend.** Your child's employment can be terminated if you fail to keep medical appointments.

DECLARATION OF PARENT/GUARDIAN

I authorise a Medical Officer to seek information, if necessary from my child's General Practitioner and I declare that to the best of my knowledge the above information is true and that, **in my opinion, the performance/activity stated will not affect my child's health or education.**

Name: (Block Letters)

Signed:

Date:

In order to assist us in monitoring the effectiveness of our Equal Opportunities Policy you are requested to give the following information in relation to your child.

Ethnic Origin: I would describe my child's ethnic origin as: (Please tick appropriate box)

White	UK	<input type="checkbox"/>
	European	<input type="checkbox"/>
	Irish	<input type="checkbox"/>
	Other	<input type="checkbox"/>

Black	African	<input type="checkbox"/>
	African Caribbean	<input type="checkbox"/>
	Other	<input type="checkbox"/>

Mixed	<input type="checkbox"/>
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Asian	Indian	<input type="checkbox"/>
	Pakistani	<input type="checkbox"/>
	Bangladeshi	<input type="checkbox"/>
	Chinese	<input type="checkbox"/>
	Vietnamese	<input type="checkbox"/>
	Other	<input type="checkbox"/>

Any Other Group	<input type="checkbox"/>
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Please state)

Please return this form to the employer who will then return it to the Child Employment Section

CLINIC DECLARATION

I certify that, in my opinion, employment will *not* be prejudicial to the health or physical development of this child and will *not* render this child unfit to obtain the proper benefit from the education provided.

Signed:

Date:

(School Doctor)

Official Stamp:

PART 3 (TO BE COMPLETED IF SCHOOL ABSENCE IS REQUIRED)

Applicant to complete 3a and 3b

Head Teacher to complete 3c

3a. Notification to Head Teacher

Dear Head Teacher

A pupil from your school has been given an opportunity to participate in a forthcoming performance. In order for him/her to take part it will be necessary for him/her to be absent from school.

We are currently in the process of applying for a Performance Licence, but this will require your consent to authorise the required absence. Details in relation to this performance are recorded in section **3b** below. Please complete Section **3c** confirming whether or not you are willing to authorise the required absences.

If you have any queries in relation to this performance please contact me on the number below, or contact the Licensing Authority on 0121 303 5125.

Thank you for your assistance.

Signed:

Position in the Company:

Tel No:

3b. Details relating to the Performance.

Name of Child:

Title & Nature of Performance:

Place of Performance:

Dates of school absence required:

3b. This Section to be completed by the Head Teacher.

I am not willing to authorise absence for this performance because:

I agree to authorise absence for this performance

Name:

Designation:

School Name:

Address:

Postcode:

Tel No:

Fax No:

Signed:

Date:

Official School Stamp: