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| **Air Training Corps Consent Certificate** | **RAFAC Form 3822A** |
| **Section 1.** **Personal Details** to be completed in BLOCK CAPITALS by the person having parental responsibility |  PLEASE ATTACHA RECENT PASSPORT-SIZED PHOTOGRAPH  |
| **Full Name of son/daughter/ward** |  |
| **Date of Birth** | *Day:* | DD | *Month:* | MM | *Year:* | YYYY | **Gender**: | Male / Female |
| **Nationality** |  | **Religion** |  |
| **Full Name of person with parental responsibility** |  |
| **Relationship to Cadet** |  |
| **Section 2 Consent to Join**I consent to my son/daughter/ward, named in section 1, joining the Air Training Corps. I can confirm that they are at least 12 years of age and not below Year 8 at school.I undertake to be responsible for any clothing and equipment loaned to him/her, which remains the property of Her Majesty’s Government, and I will ensure that it is returned in good condition (fair wear and tear excepted) immediately he/she ceases to be an ATC cadet or whenever called upon to do so by a duly authorised officer. I note that I can withdraw my permission, in writing, at any time | **Section 6** **Flying**As an ATC Cadet, your son/daughter/ward may have the opportunity of passenger or instructional flights in British military registered aircraft.All military aviation activity is conducted under Military Aviation Authority (MAA) regulation with sub-ordinate orders reinforcing or amplifying MAA regulation for aircraft type specific activity.Irrespective of aircraft type your son/daughter/ward will have been thoroughly briefed and appropriately supplied with safety equipment before flight. Medical fitness of cadets is important for the safety of the aircraft and crew. Cadets may be required to undertake further medical scrutiny before being allowed to fly in certain military aircraft types. If as a result of further medical scrutiny Cadets are found to be medically unsuitable they will be prevented from undertaking flights.Whilst the MoD does all it can to reduce the risks associated with flying to ‘as low as reasonably practicable’, and your son/daughter/ward will be carefully supervised, there is a residual risk to any flying activity. Whilst accidents are rare, they can happen which may have fatal results.**Consent to Flying/Gliding** |
| **Section 3** **Data Protection**I agree to the ATC recording and processing information about my son/daughter/ward on MOD systems. I understand this information is for administrating his/her membership of the ATC. My consent is conditional upon the ATC complying with its duties and obligations under the Data Protection Act.This information will be held and processed for the following purposes:1. Maintaining a record of training achievement
2. Maintaining a record of next of kin
3. Photographic & Video release
4. Participation in authorised activities
5. Maintaining a record of Flying/Gliding Consent
6. Maintaining a record of medical condition(s), which could impact on eligibility for activities
 |
| I consent to my son/daughter/ward flying in the following categories of aircraft:  | **Yes** | **No** |
| British military passenger transport aircraft and helicopters | □ | □ |
| Other types of British military aircraft including high performance jets | □ | □ |
| British military light aircraft and gliders for the purposes of air experience and instruction | □ | □ |
| **Section 4** **Photographic & Video**The ATC frequently takes photographs/videos of cadets participating in cadet related activities. These images may appear in press publications, promotional videos, website newsrooms, including cadet web sites and occasionally on television, to promote and aid recruitment in the ATC. All taken and stored images are within the limitations of the Data Protection Act. The ATC never release home addresses to the media. |
| British military gliders and powered aircraft on his/her own as a solo pilot | □ | □ |
| **Parental / Guardian Agreement**I give my approval, as qualified in the consents above for my son/daughter/ward to participate in ATC activities.I consent / do not consent *(please delete one)* to the Officer in Charge or his appointed representative to act as the person responsible should my son/daughter/ward have to undergo medical treatment including any emergency operation to which I am unable to physically give consent.I have completed the Medical information overleaf advising the squadron of medical conditions which could impact on the activities in which my son/daughter/ward can participate within the ATC and control measures which may help to mitigate any symptoms. I will inform the Commanding Officer if there is any change to the cadet’s medical condition(s) during their involvement with the ATC.  |
| I consent to my son/daughter/ward’simages being used to promote the ATC. | **Yes** □ | **No** □ |
| **Section 5** **Participation in Activities**As part of the normal ATC programme, cadets may participate in strenuous physical activities such as fieldcraft, adventure training and leadership exercises. These activities are designed to stretch individuals outside their comfort zone, under controlled conditions, led by appropriately qualified staff. |
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| I consent to my son/daughter/wardparticipating in strenuous physical activities | **Yes □** | **No □** |
|  |
| **Signature:** |  | **Date:** |  |  |
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| **Contact Details** |
| **Full Home Address:** |  |
|  |
|  | Postcode: |  |
| **Cadet** | *Home Phone:* |  | *Mobile Phone:* |  |
| *E-Mail Address:* |  |
| **Next of Kin** | *Work Phone:* |  | *Mobile Phone:* |  |
| *E-Mail Address:* |  |
| **School** |  |
| **Other Contact** **Details** |  |
|  |
| **Cadet Medical Information** |
| **Asthma:** | Yes / No | *Inhaler used:*  | Yes / No | Type:  | *Severity:* |  |
| **Diabetes:** | Yes / No | *Controlled by:* |  |
| **Allergies:** | Yes / No | *(if yes, please circle any that apply and indicate the severity)* | *Auto Injector:* | Yes / No |
| Nut: | Seafood: | Penicillin: |
| Wheat: | Lactose: | Hay fever / Pollen: |
| Other (specify): |  |
| **Dietary Restrictions:**  | Vegetarian | Vegan | Halal | Kosher |
| Details / Other (specify): |  |
| **Medical Conditions which could impact on ATC activities:**  | Include anything which may require hospitalisation and/or regular medication. Please also include any control measures which may be required by the cadet to prevent onset of the condition; this will assist the staff in handling any activity in which the cadet may be involved.**Return this form in an envelope if information is listed.** |
| *NIL / Details (attach additional pages if necessary)* |
| **GP Details:** |  |
|  |
|  | NHS/CHI/HSCN No. |  |
|  |  |  |
| ***Name of person completing medical information*** |  | ***Signature*** |
|  |
| **BADER No** *(allocated automatically by the MOD system)* : |  |

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| **What is the Cadets ethnic group?** *Choose ONE section from A to E, then tick the appropriate box to indicate the ethnic group.* | **RAF Form 3822A** |

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| **A – White** |
| British |  |  | Irish |  |  | Any other White background |  |
| **B : Mixed** |
| White and Black Caribbean |  |  | White and Black African |  |  | White and Asian |  |
|  |
| Any other mixed background |  |  |  |  |  |  |  |
| **C : Asian or Asian British** |
| Indian |  |  | Pakistani |  |  | Bangladeshi |  |
|  |
| Any other Asian background |  |  |  |  |  |  |  |
| **D : Black or Black British** |
| Caribbean |  |  | African |  |  | Any other Black background |  |
| **E : Chinese or other ethnic group** |
| Chinese |  |  | Any other |  |  |  |  |
| **Not stated** |
| Not stated |  |  |  |  |  |  |  |

**Data Protection Act**

**DPA 2018. This form contains personal data as defined by the DPA 2018. The RAFAC will protect the personal data provided and ensure that it is not passed to anyone who is not authorised to see it. The information provided will be processed in accordance with the regulations contained in the Act and the RAFAC privacy notice which is available at the links below:**

<https://www.raf.mod.uk/aircadets/the-hangar/staff-resources/> [RAFAC Privacy Notice Cadet](https://sharepoint.bader.mod.uk/QM/_layouts/15/WopiFrame.aspx?sourcedoc=/QM/Controlled%20Documents/RAFAC%20Privacy%20Notice%20Cadet.docx&action=default) [RAFAC Privacy Notice CFAV](https://sharepoint.bader.mod.uk/QM/_layouts/15/WopiFrame.aspx?sourcedoc=/QM/Controlled%20Documents/RAFAC%20Privacy%20Notice%20CFAV.docx&action=default)