



TRADITIONAL GYPSY COB ASSOCIATION

SELF DISCLOSURE FORM

Name:

Any Previous Name/s to which the you have been known as:.....

Address:.....

.....

Postcode:.....

Previous address if moved within 5 years:

Address:.....

.....

Postcode:.....

Telephone Number:.....Mobile No.....

Email Address.....

National Insurance Number:.....

I, declare that I have no criminal convictions in respect of offences against children or vulnerable adults, sexual offences, child pornography, animal cruelty, violence or any other offences which would prevent acceptance to The TGCA, or have been prohibited from working with children or vulnerable adults.

Furthermore, I declare I have no health or other disabilities (other than could be corrected by hearing aids or spectacles etc) and am fit and healthy to carry out judging commitments for The TGCA in accordance with the panels to which I have applied.

I agree to inform TGCA immediately should any circumstances change that alters the status of the self-disclosure form.

Print Name:.....

Signature:.....

Date.....