

# **Client Contact Information, Consent and Privacy Policy Sheet**

Welcome to RestoreU, please read the following information carefully, complete your details and provide your consent. We appreciate your patience and thank you for your time.

NAME:
AGE:
ADDRESS:
PHONE:
EMAIL:
EMERGENCY CONTACT: NAME
NUMBER
RELATIONSHIP TO YOU
Please tick any of the boxes below that apply to you:
High or low blood pressure
Hearing impairment
Restricted mobility
Anxiety
Partially sighted
Asthma
Other (please specify)
· · · · · ·
SIGNATURE DATE
FULL NAME

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Meditation is a safe and effective stress management tool. However, if you have any of the following conditions or are under the supervision by the mental health team/health care provider, we will require you to obtain consent from them to attend this meditation course.

If you tick 'yes' to any of the following contra-indications please either provide a letter from your mental health team/health care provider or alternatively sign the declaration below to confirm that you have obtained a verbal consent from your mental health team/health care provider.

- Clinical Depression
- Bipolar
- Epilepsy
- **C** Schizophrenia

I declare I have made my mental health team/health care providers aware that I am attending a Meditation course and I agree that I will notify my mental health team/health care provider should my health or symptoms change during this course.

### Only sign here if you have ticked yes to one of the contra-indications above.

SIGNATURE	DATE
FULL NAME	

### PRIVACY POLICY

I, Sonia Norman (RestoreU, Meditation Teacher, contact details as per below) collect the personal information overleaf regarding your health and background that is relevant to support your meditation course only. I do not provide your data to anyone else without your consent. I will not pass your personal details to any third part.

It is in my legitimate interest to collect these personal details as it provides me with the information necessary to provide support to you more effectively to help you manage your learning on this course.

Any hard copies of data are securely stored in a lockable container. Any soft copy is held on a note taking system which is password protected and the password is only known by me. All data will be stored for 7 years from the last course you attended, after which time they will be destroyed.

I may contact you to reconfirm classes or make changes if necessary. I may also from time to time contact you for specific direct marketing.

Would you like to be contacted for appointment confirmations (please circle)	YES / NO
Would you like to be contacted for direct marketing (please circle)	YES / NO

### Please advise your preferred method of contact (please circle)

Version 1: May 2020

### EMAIL: YES / NO or PHONE: YES / NO

**I** Please tick the following, any questions please let me know.

- I have read & understand the above and consent to attending the meditation course.
- I have read & understand the information given to me regarding my rights & concerns as detailed in Appendix 1 (below)
- I consent to my personal details being used to support my meditation course.
- I consent to my data being stored for 7 years.

You have the right to withdraw consent at anytime and can opt out by emailing <u>norman.sonia@gmail.com</u>

SIGNED	DATE
FULL NAME:	
Signature of parent/carer (if under 16 years old)	
SIGNED	DATE
FULL NAME	
RELATIONSHIP TO CLIENT	

# **APPENDIX 1**

### Your rights concerning your data

The Data Protection legislation gives you certain rights, including the right to:

- 1. Request a copy of any personal data held about you.
- 2. Request the correction of inaccurate or incomplete information.
- 3. Object to the use of your personal information.
- 4. Request your information to be transferred to a third party.

You can make a request in writing concerning any of the above rights outlining the reason for the dispute to the following contact and address:

Sonia Norman 17 Moorhen Way Buckingham MK18 1GN

If necessary, any data held can be amended or deleted, which will be confirmed in writing.

Version 1: May 2020

# What if I want to complain about my record?

If you have any concerns about the way your data is handled, you can challenge the record.

You can make a request in writing concerning any complaint outlining the reason for the dispute to the following contact and address:

Sonia Norman 17 Moorhen Way Buckingham MK18 1GN

If necessary, any data held can be amended or deleted, which will be confirmed in writing.

Should you still be unhappy that your concerns have not been addressed, you can ask for an independent review of your complaint, details for which will be provided to you.