

<u>Please return your original DBS certificate and signed consent form to:</u>

British Gymnastics, Customer Service Team, Lilleshall National Sports Centre Nr Newport Shropshire TF10 9AT

I, ______ Membership No______ give my consent for British Gymnastics (BG) to access my status information on-line through the use of the DBS Update Service as frequently as may be required by the BG person(s) for the purposes of my role as ______ which requires me to hold a DBS Enhanced Disclosure and such consent is provided by me for the duration of my appointment to the role of ______ and until such time as I notify BG that I no longer occupy a role requiring a DBS Enhanced Disclosure.

In the event of me being appointed to another role which requires me to hold a DBS Enhanced Disclosure, then I hereby consent to BG continuing to access my status information on-line through the DBS Update Service for the purposes of this role and for the duration of my appointment to such role.

In addition, I enclose my DBS Enhanced Disclosure Certificate^{*} and give my consent to BG to record the details.

Print Name:
Address:
Signature: Date:

*The original DBS Enhanced disclosure certificate is required if it was not completed via British Gymnastics/GBG or was a BG paper application.