

Your reference:

Date:



## Publishing Permission

### Local Services Database - Sports, Hobbies & Venues

Please check carefully the details below (which reflect information which is held on our database at present); add, delete or amend details as appropriate, and add your signature and the date (the form should be signed by the individual whose contact details are given).

Please ensure that you have given us contact details (section 3) and permission to publish at least one contact number for your organisation (section 2), so that we can provide an appropriate service to the public. Thank you for your time and help.

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#### Section 1\* *The details below will be published for public information.*

Name of organisation:

Contact position:

Contact title:

Contact first name:

Contact surname:

Website:

Telephone at venue:

Venue

address:

Town:

County:

Postcode:

Day and time of meetings (if applicable):

Age categories:  0 to 5  6 to 12  13 to 18  19 to 49  50+ Suitable for disabled?

Other information  
for publication:

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#### Section 2\*\* *The details below will be published for public information ONLY if you authorise us to do so by ticking the relevant box. Please ensure that you tick in the relevant box(es) to permit us to publish the information. These details should relate to the CONTACT whose name is shown in italics in Section 1.*

Telephone home:

Mobile:

Telephone work:

Fax:

Email address:

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#### Section 3\*\*\* *The details below will be used by EEBC staff only for purposes of contacting you; they will NOT be published for public information (unless they are identical to those in Section 1). The address details should relate to the CONTACT whose name is shown in italics in Section 1.*

Contact address:

Other information for EEBC use only:

Town:

County:

Postcode:

I confirm that the above details are correct, and that they may be used as follows:

**Section 1\*** Freely available on the Internet (e.g. within the EEBC website); in the Leisure Listings booklet published by EEBC; or as information provided by EEBC staff over the telephone in response to enquiries.

**Section 2\*\*** As Section 1, but only where indicated with a tick in the appropriate box. Information not approved for disclosure will be maintained for contact use by EEBC staff only.

**Section 3\*\*\*** For contact use by EEBC staff only.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return to: Dr Sam Beak, EEBC, Town Hall, The Parade, Epsom, Surrey KT18 5BY