

# Busking Permit - Parental Consent Form

Please complete in BLOCK letters.

## Busker Details

Title  Given Name/s   
Surname  Date of Birth  /  /

## Performance Name

## Parental Consent Details

Title  Given Name/s   
Surname  (Parent/Guardian)

### Address

Unit/Street No  Street

Suburb  State  Postcode

Phone H  B  M

Email

**I hereby give consent for my child/ward (names) to perform as a busker in the designated busking area.**

I understand that:

1. City of Launceston provides no supervision of buskers under the age 16 years.
2. All buskers **must comply** with the City of Launceston's Code of Conduct - Busking 05-Plx-022.

Your Signature \_\_\_\_\_ Date  /  /

**Personal Information Protection Statement**

As required under the *Personal Information Protection Act 2004*

1.	Personal information is managed in accordance with the <i>Personal Information Protection Act 2004</i> and may be accessed by the individual to whom it relates, on request to Launceston City Council.
2.	Information can be used for other purposes permitted by the <i>Local Government Act 1993</i> and regulations made by or under that Act, and, if necessary, may be disclosed to other public sector bodies, agents or contractors of Launceston City Council, in accordance with Council's Personal Information Protection Policy (17-Plx-005).
3.	Failure to provide this information may result in your application not being able to be accepted or processed.

<b>File No.</b>					
<b>CS</b>		<b>LC</b>		<b>ECM</b>	
<b>Doc. No.</b>					
<b>Action Officer</b>			<b>Date Received</b>		

**PURPOSE**

To provide parental permission for an underage busker to perform on busking sites within the Launceston CBD.

**SCOPE**

Customer Service and Liveable Communities

**RELATED POLICIES & PROCEDURES**

City of Launceston's Code of Conduct - Busking 05-Plx-022.

**DOCUMENT INFORMATION**

<b>Reference number</b>	05-Fmx-029
<b>Version</b>	23/08/2022
<b>Review</b>	23/08/2023
<b>Key function</b>	Community Relations
<b>Document type</b>	External Use Form
<b>Responsible Network</b>	Community and Place
<b>Approved by</b>	Manager Community Relations
<b>Action Officer</b>	Philippa Lees
<b>Text search key words</b>	application form, busking, parental consent

<b>To be communicated to</b> (To be identified by Approver) (Insert ✓ in relevant row)	✓	Department/Area only
		Network via General Manager and Managers
	✓	Specific Areas: • Customer Service
		Organisation-wide
	✓	Website
	Intranet (via a link)	

<b>Hard copy distribution</b>	N/A
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