



Royal College
of Nursing
Executive Nurse Network

RCN Executive Nurse Network membership and communication consent form

PLEASE USE BLOCK CAPITALS TO COMPLETE THIS FORM

Name

Organisation:

Sector:

Office address:

Job Title:

Email address:

Contact number:

PA name and email:

Please circle or bold your answers

Have we got your permission to speak directly with your PA?

Yes/No

Are you an RCN Member?

Yes/ No

If yes, what is your membership number?

Are you an accountable member of the board of your organisation?

Yes/No

How did you find out about the ENN?

Recommendation/ Advert/ Direct Contact

Other _____

Your data

In order to comply with the Data Protection Act 1998, we need your permission to use your contact details. Please indicate below your preferred method of communication, then sign and date the form where shown. We will not disclose any of your contact details, or any other information you provide, for any other purpose to any other organisation without your explicit consent.

For our records and for identification purposes only, please can you include an authenticity question and your answer; eg what is your favourite colour? Red.

****Please circle your chosen option/s***

- * I only want to receive postal communication.
- * I only want to receive email communication.
- * I only want to receive information about face to face events
- * I am happy to receive postal and email communication.
- * I agree to share my contact details with other network members.

Please confirm that you have read and understand the conditions for use, and the notes relating to the eight principles of the Data Protection Act, that are found below.

I have read and understood the conditions of use on the back of this form.

I confirm that I understand that my email and / or my business address will be used solely by the Royal College of Nursing for the Executive Nurse Network. My details will only be viewable by administration staff dealing with the Executive Nurse Network or network members if I have given my consent to share this information.

Your signature:

Date:

Please return your completed form via email to: executivenursenetwork@rcn.org.uk

Conditions of use

1. This form is valid for the RCN Executive Nurse Network/ Chatham House Group only. Your consent will automatically not apply to any other usage of your personal details.
2. Personal details must only be used in circumstances where consent has been given. Signed consent must be given.
3. Under the 1998 Data Protection Act your rights include:
 - a) in accordance with principle 1 of the Act, your consent can be withdrawn at any time
 - b) in accordance with principle 2 of the Act, your details will not be used for any other purpose without your further consent
 - c) in accordance with principle 4 of the Act, your personal data will be accurately maintained and kept up to date
 - d) in accordance with principle 5 of the Act, all personal details including electronic copies will be deleted when you leave the Network
 - e) in accordance with principle 8 of the Act, your details will not be published on the website, without your further explicit consent.