



Purpose: For health & safety (who is in the room) and to affirm confidentiality.
 Confidentiality: Please respect that personal stories and identities shared here stay in the room. You agree not to record, photograph, or repeat others' stories outside the meeting. Exceptions: if there is serious risk of harm, safeguarding concerns, or where required by law, we may need to act.
 Privacy: You may use a first name or initial if preferred. Details are used only for attendance/health & safety and stored securely, then deleted within 12 months.

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#	Name / Initials	Signature (agree to confidentiality)	Time In	Time Out	Contact tel (optional, H&S only)
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