

## Initial Contact Form

We need to take some of your personal details, which will be held on our files for 10 years or until you request removal. This is to enable you access the services we provide

### Who needs support?

- An individual (aged 18+)
- An individual child (under 18) A parent or guardian will need to sign the consent section of this form on page 3
- A family - Please give the lead family member's details below and list additional members on page 2

More about the Lead Person	
Full Name	
Email Address	
Contact Numbers	
Address (Including postcode)	
More about the Person who Died	
Name	
Date of Death	
Relationship to you	
Additional Information (if applicable)	
Emergency Contact (for the person who needs support)	
Emergency Contact Name	
Relationship	
Contact Number	
Address (if different to above)	

Medical info (for the person who needs support)



**Parent/guardian consent** (only complete if the referral of for an individual under 18 years old)

<b>Contact Name</b>		
<b>Relationship to you</b>		
<b>Address including postcode</b>		
<b>Contact Telephone Number/s</b>		
<b>Email Address</b>		
<b>Signature</b>		<b>Date:</b>

**Data collection**

<b>How would you describe your ethnic background?</b>			
<b>What is your Date of Birth</b>			
<b>Who referred you to Sunflowers?</b>	<input type="checkbox"/> Coroner	<input type="checkbox"/> Police	<input type="checkbox"/> Healthcare professional
	<input type="checkbox"/> GSASS/Rethink	<input type="checkbox"/> Relative or Friend	<input type="checkbox"/> Myself
	<input type="checkbox"/> Other (give details)		
<b>If you referred yourself, how did you find out about Sunflowers?</b>	<input type="checkbox"/> Sunflowers Website	<input type="checkbox"/> Healthcare Professional	
	<input type="checkbox"/> Support Pack	<input type="checkbox"/> Police	
	<input type="checkbox"/> Social Media	<input type="checkbox"/> Coroner	
	<input type="checkbox"/> Word of Mouth	<input type="checkbox"/> Counselling Service	
	<input type="checkbox"/> Other (give details)		

<p><b>Holistic Approach: Please tick if you need assistance with any of the following...</b></p>	<input type="checkbox"/> Criminal Justice <input type="checkbox"/> Accommodation <input type="checkbox"/> Mental Health <input type="checkbox"/> Substance Misuse <input type="checkbox"/> Education <input type="checkbox"/> Employment <input type="checkbox"/> Legalities <input type="checkbox"/> Finance <input type="checkbox"/> Other (give details)
<p><b>How would you like to hear from us?</b></p>	<input type="checkbox"/> Phone <input type="checkbox"/> Post <input type="checkbox"/> Email - <i>join our mailing list to hear more about the charity's work and new opportunities for support</i>

### Data Protection & GDPR

In allowing us to store your personal information, you are consenting to us:

- Staying in touch with you via phone, email or in person to ensure that you are aware of what is on offer at Sunflowers and to help signpost you to suitable support.
- Adding you to our Mailchimp contact list which will ensure you are automatically sent bereavement support updates and the Sunflowers Newsletter.
- Using basic unidentifiable data including age and gender to help us evaluate the services we offer. Some of which may be used to help us apply for funding sources.
- Using your feedback and evaluation of our services to help us improve what we offer and in marketing or grant application material to show the impact we have.
- Sunflowers offer a variety of support services some of which we use sub-contractors to deliver. If you sign up to a service which is delivered by a subcontractor, we will share your personal contact information and needs assessment with them to enable them to deliver the provision of that service. They will treat your information in the strictest confidence.
- To enable Sunflowers to support you, we may be required to contact the police, mental health team and coroners office to gain extra support or information for you.

Any data provided in this form will be stored and processed in accordance with the DATA Protection Act 1998 and GDPR 2018 and used for various administrative and health and safety purposes.

We may share your details with other organisations that can offer additional support. Except as detailed above, we will only share your information with your express permission; unless we are legally required to do so or if we believe that you or another person is in danger. Your information will be held on our files for a period of 10 years or until such time that you request removal.

\_\_\_\_\_  
**Signature of Lead Person Named Above**

\_\_\_\_\_  
**Print Name**

What happens next? Please return this form via email to: [info@SunflowersSuicideSupport.org.uk](mailto:info@SunflowersSuicideSupport.org.uk)

Alternatively it can be posted to: **Sunflowers Suicide Support, The Cygnet, Bonds Mill, Stonehouse, Gloucestershire, GL10 3RF**