11. Privacy Notice & Data Consent (UK GDPR)

Who I am: Mary Jane Orajekwe, trading as Sweet Cuddles with Macjay (sole trader). Contact: hello@sweetcuddleswithmacjay.co.uk, 07818809731. ICO registration number: [ICO NUMBER].

What I collect: Contact details, session address, emergency contact, booking and payment records, consultation and consent forms, brief session notes, and any health information you choose to share.

Why: To book and deliver safe sessions, calculate travel, take payment, keep legally required financial records, and protect your and my safety.

Lawful basis: Contract (to provide the service), legal obligation (tax records), legitimate interests (safety and complaints), and your explicit consent for health information and any photos/testimonials.

Who sees it: Only me. I may share limited information with my insurer, accountant or payment provider, or with the police/safeguarding services if the law requires it or someone is at serious risk. Safety measures are in place to ensure the practitioner's safety while delivering every session. Your health details are never shared for this.

ID checks: New clients provide photo ID and proof of address, and have a 15-minute video intro call after payment (not recorded). Copies are stored password-protected and encrypted and securely deleted within [7] days of the first session; I keep only a short note that the check was done.

How it is kept: Paper forms in a locked file; digital records on password-protected devices. Booking messages are deleted when no longer needed.

How long: [RETENTION PERIOD, e.g. 6 years after our last session; check with insurer]. Financial records are kept for HMRC for at least 5 years after the 31 January Self Assessment deadline.

Your rights: You can ask to see, correct or delete your information, object to its use, or withdraw consent at any time by emailing hello@sweetcuddleswithmacjay.co.uk. You can complain to the ICO at ico.org.uk or 0303 123 1113.

Consent

☐ I have read this privacy notice.

☐ I give explicit consent for my health information to be recorded and used only to keep me safe in sessions.

☐ I am happy to receive occasional updates/offers by email (optional, and I can unsubscribe at any time).

Client signature: _____ Print name: _____ Date: ____/____/_____