# APPLICATION FORM

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Parent / Carer Names | | |  | | | | | |
| Address | | |  | | | | | |
| Email Address | | |  | | | | | |
| Home Telephone Number | | |  | | | | | |
| Mobile Telephone Number | | |  | | | | | |
| Child’s Name (Including siblings) | | Date of Birth | | | Disability | | |
|  | |  | | |  | | |
|  | |  | | |  | | |
|  | |  | | |  | | |
|  | |  | | |  | | |
| **Membership and Subscriptions** | | | | | | | | |
| We are a registered charity and as such rely on non-statutory funding in the form of grants and donations.  Subscriptions are a nominal contribution towards the administration of the club.  Membership Subscriptions are collected quarterly (every 3 months) by standing order (1st January, 1st April, 1st July, 1st October). Membership is open to children with special needs and their families. The child rate applies for each disabled child and each sibling. | | | | | | | | |
| Number of Children | | | | | Quarterly Subs (Over 3yrs age) | | Quarterly Subs (with proof of Council Tax Reduction or Income Support) |
| 1 | | | | | £21 | | £15 |
| 2 | | | | | £42 | | £30 |
| 3 | | | | | £63 | | £45 |
| 4 | | | | | £84 | | £60 |

Paying your subs by standing order greatly reduces our administration costs.

## Special Friends Club

13 Banner Road, Montpelier, Bristol BS6 5NA

Registered Charity 1142501

Email: admin@specialfriendsclub.org.uk www.specialfriendsclub.org.uk

*The questions below will help the trustees to get a good picture of your child’s needs; this information will help us make a*

*decision on whether Special Friends Club would be suitable for you and your family.*

|  |  |
| --- | --- |
| What is your child’s diagnosis? |  |
| Date of diagnosis? |  |
| Professionals giving diagnosis of disability? |  |
| How does your child’s condition impact on their ability to be able attend mainstream activities? |  |
| Are you in receipt of DLA/PIP? |  |
| What rate do you receive for the Care and Mobility  component? | **Care component**: Low Middle Higher Rate  **Mobility Component**: Low Higher Rate  Please circle all that apply: |
| Does your child have an Educational Health and Care Plan or do they receive extra support at school? |  |
| Does your child attend a specialist school provision or a mainstream nursery/school? Please specify |  |

***Please attach proof of your child’s disability to this form from two professionals***

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Part of our funding for activities is being provided by South Gloucestershire Council Short Breaks, Children In Need, Lottery Fund and other grant organisations. Part of the conditions of these grants is that we have to monitor and report back to each organisation. Data they need includes, who has attended an activity, how many hours, their age and the child’s disability.

This provides the local authority and organisations with details they need so that they can show how and where the funding is being spent.

Your child’s details will remain confidential between Special Friends Club and the funding organisations.

**The Trustees would be very grateful if you could complete the form below for our records.**

**I/we agree to the above details being passed onto the funding organisation for planning and funding purposes.**

Signed: Date:

|  |  |
| --- | --- |
| If you do NOT wish photographs of your children to be used for publicity purposes (no names used) e.g.  website, annual report, grant applications, please tick this box. |  |
| If you do NOT wish for your family’s contact detailed to be held on our database for administration purposes (details will not be revealed to third parties), please tick this box. |  |

**Ethnic Minority. Please tick in box below.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **White** | | | **Mixed** | **ASIAN OR**  **ASIAN BRITISH** | **BLACK OR**  **BLACK BRITISH** | **OTHER ETHNIC GROUPS** |
| White British |  |  | White & Black Caribbean | Indian | Caribbean | Chinese |
|  |
| White Irish |  |  | White & Black African | Pakistani | African | Traveller of Irish Heritage |
|  |
| Any other white background | | | White & Asian | Bangladeshi | Any other Black background | Gypsy/Roma |
|  | | | Any other mixed background | Any other Asian background |  | Any other Ethnic group |

**I understand and accept the supervision and safety of my children is the responsibility of my family at all times during club activities.**

Signed: Date:

*The Club’s membership is currently at full capacity and there is a waiting list to join. However, spaces do become available so please complete this membership form, send it to us and we will be in contact with you very soon.*

**Please post your application form to:**

**Special Friends Club, 13 Banner Road, Montpelier,**

**Bristol BS6 5NA**