User Forum

**Registration Form**

**Please note that this form must be signed by a parent or guardian if the individual is under 18 years old.**

|  |  |
| --- | --- |
| **Personal Information** | |
| First Name: |  |
| Surname: |  |
| Address: |  |
|  |
|  |
|  |
| Postcode: |  |
| Day Time Phone number: |  |
| Evening Phone number: |  |
| Contact Email address: |  |
| Date of Birth: |  |

|  |  |
| --- | --- |
| **Emergency Contact Information** | |
| First Name: |  |
| Surname: |  |
| Relationship to you: |  |
| Address:  (If different to above) |  |
|  |
|  |
|  |
| Postcode: |  |
| Day Time Phone number: |  |
| Evening Phone number: |  |
| Contact Email address: |  |
| Date of Birth: |  |

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| **Do you have any additional needs or requirements?** |
| Please tell us anything you think we might need to know: |

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| --- |
| **Do you have any interests that are relevant to the Centre?** |
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| **What is your current involvement with the Centre?** |
| E.g. Service user, parent, volunteer, etc |

The User Group intends to meet every three months. We will be as flexible as possible to ensure all members can attend every meeting, but it is useful to know in advance what days / times are general better for each person. Please indicate your general availability below:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Morning** | **Afternoon** | **Evening** |
| **Monday** |  |  |  |
| **Tuesday** |  |  |  |
| **Wednesday** |  |  |  |
| **Thursday** |  |  |  |
| **Friday** |  |  |  |
| **Saturday** |  |  |  |
| **Sunday** |  |  |  |

By signing this form, I confirm that the information given above is correct to the best of my knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| **Print name:** |  |  |  |
| **Signature:** |  | **Date:** |  |
|  |  |  |  |
| As the parent or guardian of the person above, I confirm that I am happy for them to take part in the Lambourne End User Forum. | | | |
|  |  |  |  |
| **Print name:** |  |  |  |
| **Signature:** |  | **Date:** |  |