

**Family Fun Day**

For children with disabilities, and their families

**Booking form**

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| **Family Information** |
| **Date of Family Fun Day requested:** |       |
| **Family Surname:** |       |
| **Main Contact:** |       |
| **Address:** |       |
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|       |
| **Postcode:** |       |
| **Phone number:** |       |
| **Mobile number:** |       |
| **Email address:** |       |
| **Number of adults attending:** |       |
| **Number of children attending:** |       |
| **Do you require transport to Lambourne End?\*** |       |
| **Does the transport need to be wheelchair accessible?** |       |
| **How did you hear about the Family Fun Day?** |       |

**\*** We are able to offer transport to a limited number of people from a central pick up point

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| **Individual details**  - Please provide details for ***each person*** in your group |
| **Name** | **Adult** | **Age**Under 18’s only | **Date of Birth**Under 18’s only | **Male** | **Female** |
|       | **[ ]**  |       |       | **[ ]**  | **[ ]**  |
| **Disability** (Please also tell us if you use a wheelchair) | **Dietary Requirements**(including food allergies) | **Ethnicity** | **Preferred Activities** |
|       |       |       |       |

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| **Individual details**  - Please provide details for ***each person*** in your group |
| **Name** | **Adult** | **Age**Under 18’s only | **Date of Birth**Under 18’s only | **Male** | **Female** |
|       | **[ ]**  |       |       | **[ ]**  | **[ ]**  |
| **Disability** (Please also tell us if you use a wheelchair) | **Dietary Requirements**(including food allergies) | **Ethnicity** | **Preferred Activities** |
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| **Name** | **Adult** | **Age**Under 18’s only | **Date of Birth**Under 18’s only | **Male** | **Female** |
|       | **[ ]**  |       |       | **[ ]**  | **[ ]**  |
| **Disability** (Please also tell us if you use a wheelchair) | **Dietary Requirements**(including food allergies) | **Ethnicity** | **Preferred Activities** |
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|       | **[ ]**  |       |       | **[ ]**  | **[ ]**  |
| **Disability** (Please also tell us if you use a wheelchair) | **Dietary Requirements**(including food allergies) | **Ethnicity** | **Preferred Activities** |
|       |       |       |       |

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| **Individual details**  - Please provide details for ***each person*** in your group |
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|       | **[ ]**  |       |       | **[ ]**  | **[ ]**  |
| **Disability** (Please also tell us if you use a wheelchair) | **Dietary Requirements**(including food allergies) | **Ethnicity** | **Preferred Activities** |
|       |       |       |       |

Please note that while we make every effort to allocate everyone their preferred choice of activity, we cannot guarantee that this will be possible.

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| **Number of Short Breaks hours allocated?** |       |

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| **May we take photographs of your group to use in future publicity?** |       |

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| **Anything else?**  Please give details of anything that will help us to work with your family, so that we can make the day as enjoyable as possible for you all. |
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| **Signed:** |       |
| **Dated:** |       |

Please return this form to Carolan by post, email or fax (contact details at the bottom of the page).

If you make a booking and then are unable to attend, please let us know so that we can offer the places to another family.

**DATA PROTECTION:** Personal information regarding your family is held and retained by Lambourne End Limited in accordance with our data protection policy. No personal information will be sold to other bodies or companies. Data will be used to record attendance and provide statistical and monitoring information to the London Borough of Waltham Forest, who fund the Lambourne End Family Fun Days as part of the Short Breaks Programme. Lambourne End Ltd retain your personal information to keep you informed about Short Breaks and other relevant events at Lambourne End.