**Youth Club Registration Form - From [youthworkresource.com](http://youthworkresource.com)**

Please note that the information on this form is for the use of the youth leaders at Youth Club and is not available to any other individuals or groups. This means that we will not disclose your e-mail address, mobile number or any other details to another individual without your permission.

**Details of Young Person**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: Male / Female (Circle Appropriate)

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contact Details**In the event of an emergency relating to your son/daughter please provide information below which we can use to contact you.

Adult Emergency Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical Information**   
Are there any medical conditions (i.e. allergies, epilepsy, asthma, diabetes, travel sickness etc.) which we should be aware of?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please give any details of special dietary needs we should be aware of (e.g. food allergies)

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We also have a youth worker Facebook account which may be used to contact your son/ daughter about events related to Youth Club. This account is not used after 10pm and all conversations on it are logged. If you **do not** give permission for us to use this please tick the box to the left.

I agree to my son/daughter participating in youth club and the activities run by the team. I understand that every care will be taken to ensure the health, safety and welfare of my child. I realise and accept that in the event of my child’s behaviour adversely affecting the safety of the activity, the organisers reserve the right to return my child home.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_/\_\_\_/\_\_\_