

# Child Contact Record and Membership Form

Name of lead child:	
School Attended:	
Home Address:	
Postcode:	

Please complete and return to:

Let Us Play, 5 Shaw Park Business Village, Shaw Road, Wolverhampton WV10 9LE

Name of 1 <sup>st</sup> parent/carer:			
Email address:			
Telephone number:	Home	Mobile	Work
Name of 2 <sup>nd</sup> parent/carer: (if applicable)			
Email address:			
Telephone number:	Home	Mobile	Work
If you regularly use e-mail, newsletter electronically, i		•	
Emergency Contact name:			
Emergency Contact number:	Home	Mobile	Work
Relationship to child:			
new member after our annual Sep usual (but still the same value for not the rest of our membership. Please If you are not sure how much your a lenclose a cheque for for the please put the name of the sort Code: 090155 Bank	noney). We do this to enterest see the table on the base heed to pay, just ring the member of Let Us Play.  / or I will pay by the lead child in your reference.	sure that you are ready to reack of this form for details of office and we will be glad to be a superior of the superior of th	enew again in September with  f how much you need to pay.  help.
	Gift .	Aid	
Membership subscriptions to chari tax which has already been paid or actually worth around £24.00. All ticking the box please call the office	n your membership mon membership details are	ey. This means that your £2 considered to be confider	0.00 membership donation is
Please treat my membe Play as a Gift Aid donati	•	ny future subscriptions or d	onations made to Let Us
	Signed	:	
	Print name	:	

# **Child Record Form**

Please give details of <u>all children</u> who attend Let Us Play activities.

Name of lead child:

Date of

Birth:

Male / Female (Please circle)

Please give details	s of a	ny special needs, o	disabilities, health problems, or	allei	rgies, or a	nything e	lse y	ou think we	should kn	ow:
hnic Classification	on of	child or young pe	rson (please tick)							
White British		Caribbean	White and Black Caribbean		Inc	dian	I	Chir	1000	
White Irish		African	White and Black African			stani		Chinese Other ethnic group		1
White Other		Black British	White and Asian			adeshi		Traveller		
		Other Black	Other / Mixed			n Asian			Seeker	
					Othe	Asian			ot to say	
nd child / young	τ			D	ate of				Male / Fe	mal
erson's name:	,				irth:				(Please circle	
			(1)							
	on of	child or young pe						•		
White British		Caribbean	White and Black Caribbean			dian		Chir		
Irish		African	White and Black African		Pakistani		Other ethnic group			
Other		Black British	White and Asian		Bangladeshi			Traveller		
		Other Black	Other / Mixed		British Asian Other Asian		Asylum Seeker Prefer not to say			
					Otne	Asian		Prefer n	ot to say	
rd child / young				Г	ate of				Mala / Fa	
erson's name:	•				irth:				Male / Fe	
lease give details	s of a	ny special needs, o	disabilities, health problems, or	alleı	rgies, or a	nything e	else yo	ou think we	should kn	ow:
thnic Classification	on of	child or young pe	rson (please tick)							
White British		Caribbean	White and Black Caribbean		Indian		Chinese		nese	
White Irish		African	White and Black African		Pakistani		* ************************************			
White Other		Black British	White and Asian		Bangladeshi					
		Other Black	Other / Mixed		British Asian		Asylum Seeker			
					Othe	Asian		Prefer n	ot to say	
ther Siblings:										
iblings name:				Da	te of birt	h:				
iblings name:		Date of birth:								
Siblings name:				Da	te of birt	h:				

# **Data Protection**

Let Us Play will never share your information with any third party without your written permission.

### **Photo Permission Consent**

From time to time, funders ask us to provide photographs from activities, as evidence that the activity did actually take place. It would also be nice to celebrate some of our children's achievements by featuring them in the newsletter. To comply with the Data Protection Act 1998, we need permission before we can take photographs of your child.

No personal information and/or identification of any child other than their first name will ever be displayed with a child's photograph. Consent given on this membership form will be valid for one year, but can be withdrawn at any time if you contact the Let Us Play office. We would **always** contact parents before allowing photographs of children to be used in any kind of publicity or in the press.

Please indicate below if you are happy for you child or children's photos to be used in the following ways;

- To evidence to our funders our activities and these funders may reuse these images to promote their good works.
- To be used as part of informational displays about Let Us Play.
- To be used in the Let Us Play newsletter, website and on our social media pages, (Facebook and Twitter).

Yes	No
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## **Signature**

Signed:		
Print name:		
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Date:		

The trustees of Let Us Play reserve the right to withdraw membership at **anytime**, if we feel that our charities generosity is being abused or allocated sessions are being routinely missed.

Let Us Play has a no tolerance policy for abusive behaviour to our staff, trustees and members.

Membership Payments for new members during the year until the following September.

Renewal date	Amount to pay	Renewed until
Sept 2016	£20	Sept 2017
Oct 2016	£19	Sept 2017
Nov 2016	£18	Sept 2017
Dec 2016	£17	Sept 2017
Jan 2017	£16	Sept 2018
Feb 2017	£15	Sept 2018

Renewal date	Amount to pay	Renewed until
Mar 2017	14	Sept 2018
April 2017	12	Sept 2018
May 2017	10	Sept 2018
June 2017	8	Sept 2018
July 2017	6	Sept 2018
Aug 2017	4	Sept 2018