

Membership Form

Child's Details				
First Name:	Surname:	Date of Birth:	Gender: (please circle) male/ female	School Attended:
Address:		Additional information (Medical problems, special or additional needs, allergies, dietary requirements etc):		
		Language(s) spoken		
Ethnic Origin (please circle)				
White	Dual Heritage	Asian or Asian British	Black or Black British	Chinese or any other ethnic background
British Irish Other white background	White and Black Caribbean White and Black African White and Asian Other mixed background	Bangladeshi Indian Pakistani Any other Asian Background	Caribbean African Other Black background	Chinese Any other ethnic background

Legal Parent/Guardian Details		
Title:	First Name:	Surname:
Home Address:		
Work Address:		
Home Number:	Mobile Number:	Work Number:
Email Address:		

Alternative Emergency Contact Details (Please provide the details of at least one person we can contact if we are not able to contact you)	
Alternative Contact 1:	
Name:	Relationship to the child:
Telephone Number:	Telephone Number:
Alternative Contact 2:	
Name:	Relationship to the child:
Telephone Number:	Telephone Number:

Doctor's Details	
Name:	Address:
Telephone:	

The Adventure Playground is an open access provision so children may come and go as they please. Staff cannot accept responsibility for ensuring children remain on the premises or escort them home.

- Wisbech APG offers play provision for children from the 1st September following their fifth birthday, through to 15 years (inclusive). It is recommended that children under 8 years attend with a parent/carer.
- Children under this age (1st September following their fifth birthday) ,may attend with a parent/carer over the age of 16. The parent/carer must remain on site at all times, and the child remains their responsibility. It is up to the parent/carer to decide on the suitability of the play opportunities offered, as equipment and activities are primarily targeted at ages 5+.

I give permission for staff to administer appropriate first aid if required, including the use of alcohol-free cleansing wipes and hypo-allergenic plasters. (Please indicate any allergies in the relevant boxes). I give permission for staff and to seek any necessary emergency medical advice or treatment in the event that my child is involved in a serious accident.

I confirm that the information given on all forms is correct and agree to notify the APG staff of any changes to details.

I have read and understood the above information and conditions for my child attending Wisbech APG.

**I give permission for my child to be photographed for the purposes of:
(please tick all that you consent to)**

Displays within the Adventure Playground	<input type="checkbox"/>	Local newspaper / magazine	<input type="checkbox"/>
Adventure Playground Records	<input type="checkbox"/>	National newspaper / magazine	<input type="checkbox"/>
Adventure Playground Promotional Material	<input type="checkbox"/>	County Council publications	<input type="checkbox"/>
Staff coursework	<input type="checkbox"/>	County Council Website	<input type="checkbox"/>
Adventure Playground Website	<input type="checkbox"/>	Other	<input type="checkbox"/>

Signed (Legal Parent/Guardian): _____

Date: ___/___/_____

Additional Information Continued...

Please remember that old clothes should be worn, as activities at the Adventure Playground can be very messy.