

Welcome to Bath Mencap!

We are delighted that you will be joining Bath Mencap for weekly Thursday night yoga, Friday night bowling and/or monthly Sunday Club, and any future activities we offer.

These sessions are for adults (over 18) with a learning disability.

If the participant needs additional support and is not able to come along independently they will need a parent/carer to come along with them.

Below you'll be able to tick which activities you are interested in. You don't have to turn up every week/month; come along to however many events that you like. However, we expect participants to let Izzy know (by emailing, texting or phoning) when they will be attending so she knows how many people will turn up.

If you'd like to find out more about the sessions, you can email (<u>activities@bathmencap.org.uk</u>) to find out more info or talk through any concerns.

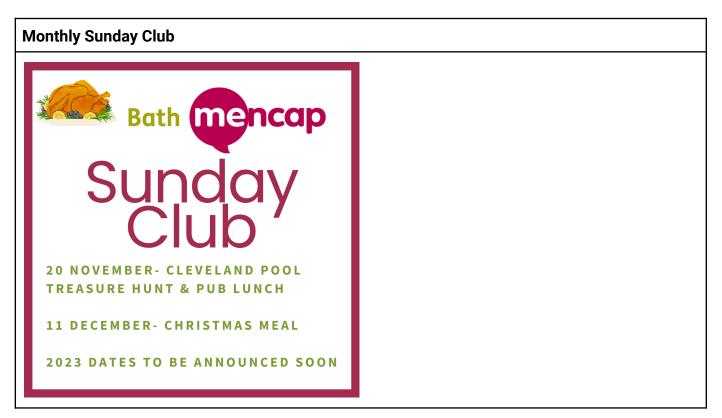
Please fill out the form below and email this document back to Izzy.

Yours sincerely

Izzy Ford (Activities Manager)









MEMBERSHIP APPLICATION FORM

Туре:	New Member	Renewal	
First name:		Surname:	
Address:		Date of Birth:	
Postcode:			
Email		Mobile phone: Home phone:	
Your interests:			
Signature:	For all appropriate members, and those under 18 years:	Parent/Guardian Name	



Signature

Ire

By signing this document, I accept the terms of the Membership Policy and Constitution of The Bath Mencap Society.

Payment is £18 per year from January to December, or £1.50 per month if you pay after January, e.g. starting in June= £9. Payment can be made directly to The Bath Mencap Society by bank transfer/faster payments to: Account No: 04338095 Sort Code: 30-90-54 The Bath Mencap Society.

Activities

Which events would the participant like to attend?

Activity	Are you interested?
Weekly Thursday Night Yoga	
Weekly Friday Night Bowling	
Monthly Sunday Club	

Please tick which activities the participant is interested in for Sunday Club.

Activity	Yes	Maybe	No/can't do
Dance			
Boat trip			
Trampolining			
Picnic in the park			
Crazy golf			



Cinema		
Theatre		
Baking		
Cook a meal together		
Go to a restaurant together		
Board game cafe		
Pottery painting		
Arts and crafts		
Walk		
Skittles		

Allergies and food preferences

Does the participant have any allergies? If yes, please give details.

Does the participant have any dietary requirements (e.g. vegetarian or vegan)?

Are there any foods that the participant dislikes?



Support needs

Does the participant have any medical conditions? If yes, please give details.

Does the participant have any communication needs? If yes, please give details.

Does the participant have any mobility/transport needs? If yes, please give details.

Photo consent

Please tick the relevant box using "/"

() **I give** permission for photos to be taken at events which might be used on social media and the website

() I don't give permission for photos to be taken at events which might be used on social media and the website



Communication and data protection

We have Whatsapp groups to communicate about yoga, bowling and Sunday Club. Would you like to join it?

Yes participant () - please provide your phone number:

Yes parent/carer () - please provide your phone number:

No ()

Are you happy for Izzy to contact the participant (or their parent/carer) by email or phone about Friday night bowling and Sunday Club. Please tick (using "/") all that apply

Email ()

Phone call ()

Text message ()

Contact the participant ()

Contact parent/carer ()

I don't give permission for you to contact us ()

Thank you

Thank you for filling out this document. Please email it to Izzy (activities@bathmencap.org.uk)

We look forward to seeing you at an event soon!

Feel free to like our Facebook page: Bath Mencap Society | Facebook