

New Member Pack

Welcome to Bath Mencap!

We are delighted that you will be joining Bath Mencap for weekly Friday night bowling and/or monthly Sunday Club.

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.

You don't have to turn up to every Friday session or Sunday Club; come along to however many you like. However, we expect participants to let Izzy know (by emailing or texting) that they will be at bowling or Sunday Club so she knows how many people will turn up.

If you'd like to find out more about the sessions, you can call (07465406269) or email (activities@bathmencap.org.uk) Izzy to find out more info or talk through any concerns.

Friday Night Bowling:



New Member Pack

Sunday Club:



Within in this pack you will find:

- Care plan
- Behaviour contract
- Communication and data protection

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

Yours sincerely

Izzy Ford (Activities Manager)

New Member Pack

Care Plan

Personal details

Participants name:

Parent/carer's name (if applicable):

Date of birth:

NHS number:

Address:

Phone number:

Email address:

Emergency contact name and number:

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?

New Member Pack

Medical conditions

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

Doctors

Doctors name (if known):

Doctors address:

Doctors contact number:

Is the participant currently having any treatment that we should be aware of?

Date of last tetanus injection:

Is the participant vaccinated against Covid? (give details of how many vaccinations)

Medication

Does the participant take any medication? If yes, please give details.

Name of medication	Reason for taking	Dose	At what time	Does the participant take their medication themselves, or is support needed?

New Member Pack

Permissions

Below are several things that we may need permission for during the year please tick boxes (by putting “/”) to give permission:

- () In the case of a medical emergency or incident I give permission for the participant to receive any emergency medication/treatment that is deemed necessary by a qualified person.
- () I give permission for sun cream to be applied if necessary.
- () I give permission for the Activities Manager to administer mild pain killers if necessary.

If so please tick your preferred option.

- () paracetamol (tablet)
- () paracetamol (liquid)
- () ibuprofen (tablet)
- () ibuprofen (liquid)

Support needs

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.

New Member Pack

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

Activity interests

Are there any activities that the participant cannot do due to medical conditions and/or mobility needs? (E.g. trampolining)

Please highlight which activities the participant would like to do during Sunday Club (using green highlighter) and which ones they definitely wouldn't like to do (in pink highlighter). Any they are neutral about can be kept blank.

- Dance class
- Yoga class
- Boat trip
- Trampolining
- Picnic in the park
- Crazy golf
- Cinema
- Theatre
- Baking
- Cook a meal together
- Board game cafe
- Pottery painting

New Member Pack

- Arts and crafts
- Walk
- Skittles

Please write down here any further information you may like to share that you will feel relevant to Bath Mencap. This could be e.g. a religion or celebration that is important to the participant.

Behaviour contract

To make the sessions an enjoyable experience for everybody we need the participant to understand the behaviour expected during bowling and Sunday Club.

1. I will not physically harm another member/staff
2. I will use appropriate language at all times
3. I will be kind to fellow members
4. I will be kind to staff
5. I will listen and follow instructions from staff to keep myself safe
6. I will not behave in a way that puts myself or others at risk.

Please sign here to confirm that you agree to the above:

New Member Pack

Communication and data protection

We have a Whatsapp group to communicate about Friday night 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](#)