**SWAY YOUTH CLUB CAFÉ - REGISTRATION FORM Participant**

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| How did you hear about SWAY YCC |  | | | | | | | | | | | |
| Name |  | | | | | | | | | | | |
| Address |  | | | | | | | | | | | |
| Postcode |  | | | | | | Tel No | | | | | |
| Email |  | | | | | | | | | | | |
| Age |  | DOB | | | | | | MALE / FEMALE | | | | |
| Cultural Background Please circle | White English | White Irish | | White Scottish | | Mixed White/ Black | | | Mixed White Asian | | | Mixed Black/Asian |
| Asian Indian | Asian Pakistani | | Asian Bangladesh | | Black African | | Black Caribbean | | | Other Please state | |
| Current Status please circle | Secondary School | | College | | University | | | Training | | | Employed | Other |
| Name of Educational Establishment |  | | | | | | | | | | | |
| Emergency Contact Details and  Relation to You |  | | | | | | | | | | | |
| I agree to abide by the Clubs rules and Code of Conduct and to make every effort to partake in the discussions and workshops led by staff.  I am interested in becoming a Youth Representative YES /NO (circle your response) | | | | | | | | | | | | |
| Signature  Date |  | | | | | | | | | | | |
| Office use  Circle where appropriate | Parental Form completed YES / NO  Approved photographs YES / NO | | | | | | | | | I am happy for photographs of myself to be used in SWAY’s promotional material YES / NO | | |

**FOLLOW UP ACTION**

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| **DATE** | **NOTES** | **ACTION TO BE TAKEN** | **PERSON RESPONSIBLE** |
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