**Community Foundation Weekend JMIC Summer Holiday Participant Registration Form**

**1.45pm – 4pm. Saturday for Girls and Sunday for Boys at JMIC, Small Heath**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| First name |  | | | | | | | | | | | | | | | | | |
| Last name |  | | | | | | | | | | | | | | | | | |
| Date of birth (DD/MM/YYYY) |  | | | | | | | Age | |  | |  | | | | | | |
| Gender | Male |  | Female | | |  | | | Other | | | |  | Prefer not to say | | |  | |
| Ethnicity | Prefer not to say | | | | | |  | | Mixed / multiple ethnic groups - White and Black African | | | | | | | | |  |
|  | Asian / Asian British - Indian | | | | | |  | | Mixed / multiple ethnic groups - White and Black Caribbean | | | | | | | | |  |
|  | Asian / Asian British - Pakistani | | | | | |  | | Mixed / multiple ethnic groups – Other | | | | | | | | |  |
|  | Asian / Asian British - Chinese | | | | | |  | | Whit – Welsh / English/ Scottish / Northern Irish / British | | | | | | | | |  |
|  | Asian / Asian British - Bangladeshi | | | | | |  | | White - Irish | | | | | | | | |  |
|  | Asian / Asian British - Other | | | | | |  | | White - Gypsy, Roma or Irish Traveller | | | | | | | | |  |
|  | Black / African / Caribbean / Black British - African | | | | | |  | | White - Eastern European | | | | | | | | |  |
|  | Black / African / Caribbean / Black British - Caribbean | | | | | |  | | White - Other | | | | | | | | |  |
|  | Black / African / Caribbean / Black British - Other | | | | | |  | | Other ethnic group - Arab | | | | | | | | |  |
|  | Mixed / multiple ethnic groups - White and Asian | | | | | |  | | Other ethnic group | | | | | | | | |  |
| Home Postcode |  | | | | | | | | | | | | | | | | | |
| Eligible for Free School Meals? | Yes | | |  |  | | | | | | No | | | |  |  | | | |
| School name |  | | | | | | | | | | | | | | | | | |
| Does the young person have a disability/SEN? (Yes/No) |  | | | | | | | | | | | | | | | | | |
| If yes, provide more information |  | | | | | | | | | | | | | | | | | |
| Food allergies and dietary requirements |  | | | | | | | | | | | | | | | | | |
| Parent / guardian name |  | | | | | | | | | | | | | | | | | |
| Parent / guardian email address |  | | | | | | | | | | | | | | | | | |
| Parent / guardian contact phone number | Contact number | | | | | | | | | Emergency number | | | | | | | | |

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| Full Home address: |
| Does your child attend our Darul Uloom  Raheem Academy  Weekend school  |
| Medical condition/Regular medications: |
| I will ensure my child regularly takes part in the activities and is suitably dressed and well behaved. I will pick up my child after the programme ends at 4pm each day. I give consent for my child to:   1. Take part indoor activities, outdoor activities and day trips; 2. Have medical treatment by qualified professionals in case of an emergency; 3. Have photo/video taken to go on reports and community Foundation website/Social Media   Signed: Parent/guardian Date: |