MEMBER APPLICATION AND CONSENT

Please complete this form to let us know that you wish to join one of the Teesdale Day Clubs as a member. Your application will be dealt with as quickly as possible. If there is not sufficient space at your preferred club, we will let you know and may be able to offer you an alternative club or put your name on our waiting list.

If you wish to apply to be a volunteer as well as a member you are welcome to do this, but you will need to complete a separate volunteer application form. Please ask at the office.

The information you provide below will only be used to enable the Association of Teesdale Day Clubs to communicate with you, and to ensure that we provide you with a safe and effective service. Your personal information will be used for our internal purposes only and to provide you with the right kind of support. They will not be given or sold to any 3rd party or used in any way without your express permission. In some emergency situations, details may be provided to services without your consent if this is in your best interests e.g., in the case of illness or accident.

This form should be returned to the office at Woodleigh, Flatts Road, Barnard Castle DL12 8AA or given to a member of the Teesdale Day Club staff team. Thank you.

| Please indicate which Club you wish to join | | |
|-----------------------------------------------------|--|--|
| Barnard Castle - Cotherstone - Evenwood – Mickleton | | |
| Middleton - Staindrop - Winston - Woodland | | |
| Surname | | |
| Forenames | | |
| Address | | |
| | | |
| Post Code | | |
| Telephone Number | | |
| Mobile number | | |
| Email Address | | |
| Date of Birth (optional) or Age | | |
| Allergies/dietary requirements | | |



MEMBER APPLICATION AND CONSENT

| EMERGENCY CONTACT | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Name | | |
| Relationship | | |
| Address | | |
| Post Code | | |
| Telephone number | | |
| Mobile number | | |
| Email address (if known) | | |
| | | |
| DOCTOR IN CASE OF EMERGENCY | | |
| Name of GP and/or Practice | | |
| Telephone number | | |
| I consent that The Association of Teesdale Day Clubs can keep my contact information (data) until I leave the lunch club. | | |
| I understand it is my responsibility to notify the Association of any changes to my details. | | |
| I understand that I have the right to request a copy of all information kept about me and to ask for any modification of this information. | | |
| I understand that I have the right to withdraw my consent to you keeping any information about me and understand that doing so may affect the service that you can provide to me. | | |
| Signed Dated | | |

Should you have any questions or concerns regarding anything at your day club, please contact the office on 01833 695822 or email teesdaledayclubs@gmail.com

If you were signposted to us, or referred by another professional, community service or agency please let us know who this was.