# Universal Youth Service

# Membership application HYC

# Young person’s details

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| First name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |
| Last name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |
| Date of birth |  |  |  |  |  |  |  |  |  |  | Gender |  | Female |  | Male |
|  |  |
| School, college or community you will represent. |  |
|  |  |
| Home address |  |
|  |  |
|  |  | Postcode |  |  |  |  |  |  |  |  |
|  |  |
| Home phone |  |  |  |  |  |  |  |  |  |  |  | Mobile |  |  |  |  |  |  |  |  |  |  |  |
|  |  |
| Email |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

# Emergency contact, if there was an emergency, who would we contact?

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| First name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |
| Last name |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |
| Relationship to young person |  |
|  |  |
| Address -if different from young person |  |
|  |
|  | Postcode |  |  |  |  |  |  |  |  |
|  |  |
| Home phone |  |  |  |  |  |  |  |  |  |  |  | Mobile |  |  |  |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| Photographic consent given  | Yes/No |

|  |  |
| --- | --- |
| Medical conditions or disabilities | Allergies / Arm or hand impairment / Asthma / Diabetes / Epilepsy / Hearing or sight difficulty / Learning difficulty / Other disability or need / Other medical condition / Reading difficulty or Dyslexia / Wheelchair user or other mobility |
| Further details |  |
|  |  |
| Medication being taken |  |
|  |  |
| Dietary requirements |  |
|  |  |
| Cultural origin - Please Circle\*Prefer not to state / Asian or Asian British - Bangladeshi / Asian or Asian British - Indian / Asian or Asian British - Other / Asian or Asian British - Pakistani / Asian or Asian British - UK / Black or Black British - African / Black or Black British - Caribbean / Black or Black British - Other / Black or Black British - UK / Chinese / Mixed - Other / Mixed - White or Asian / Mixed - White or Black African / Mixed - White or Black Caribbean / White - European / White - Irish / White - Other / White - UK / Other |

I, the named young person, have read, understood and agree to abide by the project’s rules as stated, and accept that I may have my membership suspended if I break the stated rules of membership.

|  |  |  |  |
| --- | --- | --- | --- |
| Young person’s signature |  | Date |  |
| Parents signature |  | Date |  |

### London Borough of Hillingdon – Universal Youth Service (UYS) Terms and Conditions for participants, parents and guardians.

In the event of an emergency, medical treatment including anaesthetic may be authorised on your behalf by London Borough of Hillingdon staff and their representatives. UYS programmes are fully risk assessed and managed in the context of the Council policies by appropriately qualified and vetted staff. Parents and guardians are asked to note that some activities included in the programme may have an element of risk contained therein and that there may be times during the session delivery when participants may not be under the direct supervision of staff.

Your information will be recorded on an electronic database and will be accessible by the London Borough of Hillingdon staff. Activities that you are involved in may be photographed, filmed or otherwise recorded with the intention that the materials are used for promoting future courses offered by the London Borough of Hillingdon Universal Youth Service. If you do not wish for your image to be used, please ensure you have indicated above.

The London Borough of Hillingdon reserves the right to make changes to session content, dates and venue at any time. In the event of a session being cancelled, staff will contact you to notify you if possible.

Young people with learning difficulties and disabilities are welcome on all sessions that we run. It is important that you make us aware of any support that your young person may need – failure to do this may mean that we are unable to provide the levels of support that the young person needs at late notice, and they are unable to participate in certain aspects of the programme.

We aim to provide a safe and secure environment for all young people and staff, in which all are free from harassment, intimidation, bullying and illegal practices. Our staff will challenge attitudes, values and behaviours that prevent service users from experiencing a safe and secure environment and reserve the right to ask young people to leave the premises if they refuse to manage their conduct appropriately.

**Full information, terms and conditions are available on the young.hillingdon.gov.uk website at** [What is the Youth Council? - Hillingdon Council](https://www.hillingdon.gov.uk/youth-council-explained)

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