

Computing Club 2018 Membership form

Dates of membership from 1st January 2018 to 31st December 2018

Childs first name…………………………………Second name …………………………………

Date of Birth……………………………………………………………………………………………..

Allergies/Medical Conditions…………………………………………………………………………

Membership Amount - £10.00 - Bursaries are available for low income families. Please speak to Sarah for further information. 0161 436 0587 or 07580 869 746

School name and year group………………………………………………………………………..

Parents Name and contact details …………………………………………………………………

………………………………………………………………………………………………………………

Signature…………………………………………………………………………………………………

Please indicate if you are happy for your child to walk home independently after the session. DO NOT sign if you will be picking your child up.

Signature…………………………………………….… Date……………………………

We may take photos of the children attending the club. These photos may appear on the website and social media accounts of the WOW Zone.

If you DO NOT want your child’s photo to be taken, please sign here.

Signature…………………………………………….… Date……………………………

Equality Monitoring Form

Gender

What is your child's gender?

Female: Male: Prefer not to say:

Age:

Ethnic Origin: Please tick.

Black / African / Caribbean or Black British

Caribbean

Somali

Other African background (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Black background (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Asian or Asian British

Bangladeshi

Chinese

Indian

Kashmiri

Middle Eastern

Pakistani

Vietnamese

Other Asian (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

White

White – English / Welsh / Scottish / Northern Irish /

British

White – Irish

White – Gypsy / Irish Traveller

Roma/Romani Traveller

Other White (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mixed / Dual Heritage

White and Black Caribbean

White and Black African

White and Asian

Other Mixed Origin (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Any \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prefer not to say

Disability

Does your child have a disability?

Yes: No: Prefer not to say:

Faith

Does your child identify with any religion or belief?

Yes (Please specify below): No:

Christian (Including Church of England; Catholic; Protestant and all other Christian denominations):

Buddhist: Hindu: Sikh:

Jewish: Muslim:

Any other Religion (Please Specify):

Prefer not to say: