## The Paradise Zone Youth Centre

## Membership Form 2021 Date:

**Date:** / / 2021

\*\*\* Covid Security Measures in place until further notice \*\*\*

01. Workers are vaccinated & take regular tests	07. Masks used where necessary ie. less than 1m		
02. Track & Trace measures are used inc. NHS App	08. Open sessions only outdoors - book indoors		
03. Hand Sanitizer & Hand Washing facilities used	99. Groups to be small & consistent (Bubbles)		
04. Thermometer available (& can be used by workers)	10. Snack/drinks-individual pre-wrapped portions		
05. Club & equipment regularly cleaned	11. Coats kept by guardians or stored separately		
06. Social distancing maintained where possible	12. Social distancing for Pick ups/Drop offs		
***Do not attend club if symptomatic or in	recent contact with someone with Covid ****		

Name of child /young person:		DOB:		Age:	
Home Address:	P	Postcode:			
Emergency Contact Name (if we cannot contact guardian):					
Emergency Contact Phone Numbers:					
Please Note: This info. is in case of emergencies & will be treated in confidence according to Data Protection Act 1998 & GDPR 2018					
Is there any other information about the health & welfare of your child which we should be aware of? Like a disability or a condition like Asthma, Epilepsy, Diabetes or any dietary concerns, allergies or any special needs?					
I understand that my child wants to be a member of The Paradise Zone Youth Centre & I give them permission to do so. I agree to the workers of the Paradise Zone acting in 'Loco Parentis' over my child & should it be required I give permission for any necessary medical treatment & I authorise the Paradise Zone workers to sign any medical consent forms required by the hospital/medical authorities if the delay in gaining a signature is considered by the health officials to endanger the life or wellbeing of my child.					
Parent/Guardian Name (Please print)		Parent/Guardian Signature			
Email Address:	Phone Number	r:			
I agree, as a member of The Paradise Youth Centre, to keep it a safe & fun club for everyone.					
Child/Young Person's Name (Please print)		Child/YP's Signature			
The club may use photos or video taken of activities related only for club use and with the child/young person's permis			Yes	No	
Can your child go home alone? If not we will expect them to be picked up. (Please circle)			Yes	No	
Any other information we should know?					