SESSION:	

## Children and Family Centre Registration Form



If you need help with this form please speak to a member of staff.

## **YOUR DETAILS:**

YOUR NAME:	DATE OF BIRTH	ETHNICITY CODE(see be- low)	TITLE ( e.g. Mrs/ Miss/Ms/Mr/ Other (please state)
ADDRESS:			POSTCODE:
EMAIL:	PHONE NUMBER:		
Would you like to be on our mailing list?	Please tick if yes		

## **YOUR FAMILY DETAILS:**

Please give details of ANY CHILDREN and other ADULTS LIVING AT THE SAME ADDRESS

NAME: (First & Surname)	DATE OF BIRTH	RELATIONSHIP TO CHILD/CHILDREN	M/F	ETHNICITY CODE (see below)

Is anyone in your household pregnant?

NAME:	DUE DATE

ETHNICITY	CODE	ETHNICITY	CODE
Do not wish to be recorded	REFU	White/Black Caribbean	MWBC
White British	WBRI	White Other	WOTH
White Irish	WIRI	Bangladeshi	ABAN
White/ Asian	MWAS	Indian	AIND
White/Black African	MWBA	Pakistani	APKN
Other Mixed	Moth	Other Asian	AOTH

ETHNICITY	CODE
African	BAFR
Caribbean	BCRB
Other Black	ВОТН
Chinese	CHNE
Other Ethnic Group	ООТН
Traditional Traveller	WROM
Traveller of Irish Heritage	WIRT

Do you, or anyone named on this form, have a disability or special needs that you would like us to be aware of?		
NAME:	DETAILS:	
(ASD) Autistic Spectrum Disorder	(VI) Visual Impairment	
(BESD) Behaviour, Emotional and Social Difficulties	(PMLD) Profound and Multiple Learning Difficulty	
(HI) Hearing Impairment	(SLCN) Speech, Language, Communication Needs	
(MLD) Moderate Learning Difficulty)	(SLD) Severe Learning Difficulty	
(MSI) Multi-Sensory Impairment	(SPLD) Specific Learning Difficulty	
(PD) Physical Disability	(OTH) Other	
WOULD YOU DESCRIBE YOURSELF AS		
Heterosexual/straight Gay/Lesbian	Bisexual Prefer not to say	
PLEASE TICK ALL BOXES THAT APPLY:		
Are you receiving Universal Credit?		
Are you receiving any other work-related benefits? (e.g. Job Seeker's Allowance, Income Support, Child Tax Credits):		
Is anyone in your household in employment?		
Would you or anyone in your household be interested in attending an adult learning course?		
Do you give your consent for images of your child/children to be used to promote or publicise the Children's Centre?		
How did you hear about the Children and Family Centre? (e.g. Midwife, Health Visitor, Facebook, recommended by a friend etc)		
I have read, understand and agree with the general information provided.		
Signed Print name		

What is the main language used at home?

This service provides access to Children and Family Centres and support in order to improve the outcomes and life chances for children and their families. To see how we use your personal data and what your information rights are, please read our access to information privacy notice. It should be read in addition to the Council's overall customer privacy notice at www.warwickshire.gov.uk/privacycc which includes contact details if you have a complaint about your information rights. For general enquiries contact Warwickshire County Council customer services on 01926 410410.