

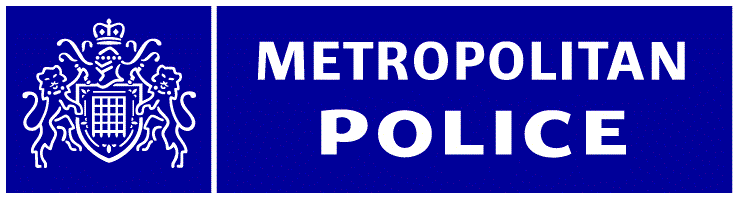
**WANDSWORTH SUMMER CAMP**

***For young people aged 9 to 16 who***

***live or go to school in Wandsworth and Merton***

***Open on weekdays from Tuesday 26 July to***

***Thursday 18 August 2022 - 10 a.m. to 4 p.m.***



[**www.wandsworthsummercamp.org**](http://www.wandsworthsummercamp.org)  ***.***

***At:***

***How to Join Below***

***How to Register and Pay Page 2***

***Enrolment Details Page 3***

***Medical Details Form Pages 4 & 5***

***Consent Form Pages 6 & 7***

***Additional Information Page 8***

***St Cecilia’s Church of England School***

***Sutherland Grove***

***Wandsworth SW18 5JR***

**The total cost for the 18 day duration of the project is £180 (Non-refundable)**

***Project Manager Louise Dann Tel:* 07767 311 286 *or email:*** [*Louise.Dann2@met.police.uk*](mailto:Louise.Dann2@met.police.uk)

**How do you join?**

A parent or legal guardian must complete and sign the attached Application Form. For the purposes of insurance safeguarding, it is very important that the form is completed honestly and in full.

When registering, proof of **AGE** and **PERMANANT ADDRESS** of the **young person** is required. Only those young people who reside or go to school in Wandsworth can be registered. The following Identification only will be accepted: **AGE**: Birth Certificate / Passport / Medical Card / Working Family Tax Credit or DSS Child Benefit Form **ADDRESS**: Utility bill (up to 3 months old) / Council Tax / Telephone bill or other proof of the applicant’s address.

Payment: The total cost for the duration of the project is **£180,** or a family rate with proof provided. Payment methods are by cash or by bank transferprior to the applicant joining the project.

On the enrolment day **please** bring the completed application form/s and ***two passport sized photographs*** of each applicant.

Enrolments will take place: **At :**

**Youth Offending Team Office, 177 Blackshaw Road, London, SW17 0DJ**

on the date shown below.

**Between 12 noon and 8 pm Monday 11 July 2022**

**Please note Monday 25 July** **will be for staff induction; Tuesday 26 July at 10am is the start date.**

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**WANDSWORTH SUMMER CAMP**

**REGISTRATION & PAYMENT**

**The cost for the total duration of the project is £180 per person which is non-refundable.**

**(This covers from Tuesday 26 July to Thursday 18 August the times are from 10 am to 4 pm)**

***PLEASE COMPLETE THIS ENROLMENT FORM, CHOOSE OPTION ‘A’ OR ‘B’ BELOW, AND IN BOTH CASES, TAKE IT WITH YOU TO THE ENROLMENT DAY WITH THESE 3 ITEMS:***

1. ***TWO PASSPORT SIZE PHOTOS OF THE APPLICAN***

***2) PROOF OF AGE and ADDRESS***

***3) ENROLMENT FEE (unless you are paying by bank transfer)***

***OPTION ‘A’ PAY CASH IN PERSON AT AN ENROLMENT DAY***

***I CHOOSE THIS OPTION (Please tick)***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***OPTION ‘B’ PAY ONLINE BY BANK TRANSFER***

*(Details will be sent to you by email if this box is ticked)*

***I CHOOSE THIS OPTION (Please tick)***

**IF USING THIS OPTION, ALL BANK TRANSFERS MUST BE RECEIVED AT OUR BANK BEFORE THE**

**APPLICANT CAN JOIN THE SUMMER CAMP**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Family rate 1st child £180 2nd child £ 150 3rd child £120*

*(Applies* ***only*** *to those from same household address)*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Food and Drink We do not provide food.**

**There is a tuck shop available where a variety of snacks, drinks, crisps etc. may be purchased.**

Please note: No takeaway meals will be allowed on site.

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***For office use***

Method of Payment:

**Cash  Bank Transfer **

**Enrolment** Ref: \_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL AMOUNT £**

Details below if this also covers payment for other Enrolment numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_¬¬¬¬¬\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_

Project representative recording details (please print):

***For office use***

**Place one photograph here and pin the other to the form.**

*For office use:* ***Proof of age and address seen by: Date: 2022.***

Which ETHNIC ORIGIN do you consider the applicant to be: *Please tick, highlight, or put an x?*

Caribbean

African

Any other Black Background

White British

White Irish

Any other White Background

Black British

Chinese

Indian

Pakistani

Bangladeshi

Any other Asian Background

White & Black Caribbean

White & African

White & Asian

Any other Mixed Background

Any other Ethnic Group

Declined to Answer.

**Applicant’s Details** *Please use block capitals)* ***\*****Tick box where necessary*.

|  |  |
| --- | --- |
| FORENAME |  |
| SURNAME |  |
| ADDRESS |  |
| POSTCODE |  |
| DATE OF BIRTH  DAY/MONTH/YEAR |  |
| AGE |  |
| MALE OR FEMALE |  |
| HOME TEL: |  |
| MOBILE TEL: |  |
| If the applicant attends school - Name/Address of School |  |

**DOES THE APPLICANT RECEIVE FREE SCHOOL MEALS**? Yes No

(The information helps sponsors when we are fundraising)

RELIGION (OPTIONAL): ­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***Applicant’s name***

**MEDICAL INFORMATION:** (For use in an emergency)

***Any information you can provide will not affect your child / the applicant from enrolment in the Projects. It is solely for staff awareness and understanding.***

**Does the applicant have an EHCP (Education, Health, and Care Plan?)? YES NO**

**Does the applicant have any support needs/disabilities/learning needs? YES NO**

**Looked after child?** **YES NO**

**Does the applicant have any medical needs? YES NO**

***If any of the above apply to your child / the applicant, please give details below:***

*To the best of your knowledge has your child been in contact with any contagious or infectious disease* ***including***

***Coronavirus*** *or had anything in the last four weeks that may be contagious or infectious?*

***YES/NO\**** *If* ***Yes*** *give brief details:*

*Is your child allergic to any medication? YES/NO\* If yes please specify:*

***Please tick***

Has your child received a tetanus injection in the last five years? **YES NO DON’T KNOW**

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*Does your child have any special needs, not shown elsewhere on this form that we* ***need*** *to know about which*

*may help us support him/her correctly? If so, please specify:*

**Name and address of family doctor/surgery**  ***(MUST BE COMPLETED)***

Telephone Number

IN THE EVENT OF AN EMERGENCY PLEASE GIVE DETAILS OF A PERSON THAT CAN BE CONTACTED AT ALL TIMES BY TELEPHONE.

Name:

Address:

Postcode:

Relationship (e.g., Aunt, brother, grandparent)

Telephone: Work

Mobile Email

SIGNATURE NAME (Please print)

Parent / Guardian / other (please specify

Date

***All medical information will be treated as strictly confidential.***

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***Continued – Applicants details*  WANDSWORTH SUMMER CAMP**

**DECLARATION BY PARENT / LEGAL GUARDIAN**

I (Full name)

Of (address)

***Please Include***

***Postcode***

I hereby give permission for the child in my care (their name)

to take part in the 2022 Wandsworth Summer Camp activities and agree to their participation in any or all the events.

**IF THIS APPLICATION IS FOR SOMEONE UNDER 12 YEARS OLD, PLEASE SEE NEXT PAGE** otherwise continue:

**I understand that it is my responsibility to ensure their safe passage to and from the project and accept that they can, unless being collected, leave the centre unaccompanied at the end of the day.**

**I also agree to ensure that they are made aware they must remain on site all day.**

**I agree that that the applicant/your child DOES NOT leave the project centre during LUNCHTIME**.

***Please tick to accept this condition*.**

I agree to the child in my care receiving any emergency medical treatment, including anaesthetic, as considered necessary by the medical authorities present. I undertake to inform the organisers as soon as possible of any change in the medical circumstances of my child, between the date signed and the commencement of the project.

**IMPORTANT.**

**I understand that Photographs/Videos will be taken throughout the project which will be used for display, fundraising, to send to our sponsors and publicity purposes only.**

**Any property / valuables brought to the project will be the responsibility of my child to ensure their safe keeping. These may not be deposited with members of staff.**

**Signed Date**

(Parent / Legal Guardian)

I agree to provide two passport size photographs of the above named applicant together with ID before, or on the day that my child attends the Wandsworth Summer Camps.

**The manager / Team reserves the right to withhold or withdraw membership at their discretion. Project facilities outlined in the programme are made available on the understanding that they may be altered or cancelled at any time without notice, due to circumstances beyond our control.**

***UNLESS THIS FORM IS FILLED OUT IN FULL, ENROLMENT WILL BE DECLINED***

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**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**WANDSWORTH SUMMER CAMP**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***www.parallelyouthenterprise.com***

THIS FORM SPECIFICALLY APPLIES TO ANY YOUNG PERSON WHO IS **UNDER 12 YEARS OLD ON 26 JULY 2022** AND IS ENROLLING WITH THE WANDSWORTH SUMMER CAMP.

To adhere to the guidelines of our Safeguarding Policy, and for the safety of the young people who attend the summer camps the following conditions apply.

All parents/ guardians of a young person applying to enrol with the Summer Camps, and who has not attained the age of 12 years old by 26 July 2022 MUST, sign below to certify that they are responsible for arranging arrival of the young person/s to St Cecilia’s School at the start of the day and making their own arrangements for collecting the young person at the end of the day, which is 4 pm.

**DECLARATION BY PARENT / LEGAL GUARDIAN**

I (Full name)

Of (address)

***Please Include***

***Postcode***

have read the above conditions of enrolment for those young people who are under 12 years old and confirm that I am responsible for making arrangements for the safe passage to and from the Wandsworth Summer Camp of:

*NAME OF CHILD IN MY CARE*

*WHO WILL BE*: (please state age) *YEARS OLD ON 26 JULY 2021?*

**Signed Date**

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**ADDITIONAL INFORMATION**

**Coronavirus (COVID 19)**

We understand what a difficult time it is been over the past years, and we want to support all our service users as much as we can, especially when it comes to health and safety.

We want to assure all our service users that arrangements will be in place to ensure that all staff, families, and children are safe. This includes our COVID 19, risk assessments and staff awareness around Coronavirus.

**COVID-19** Using our experience, we will adhere to any Covid-19 safeguarding issues that may be required during the

time of the project and by implementing our strict sanitising there will be a professional daily clean of the site.

**PROJECT RULES**

Any breach of the following rules could result in a temporary or permanent exclusion from the

Project or ban from further trips.

* The summer camp rules regarding Covid-19 safety must be followed.
* The possession of Drugs, Alcohol and cigarettes is prohibited.
* Offensive behaviour will not be tolerated. Members will be expected to behave appropriately whilst on trips and whilst on the journey to and from the centre.
* Out of bounds areas may not be entered and barriers and walls must not be climbed.
* No food and drink to be consumed within the sports halls.
* Members will not be admitted to the Project Centre or allowed on any trips without a valid membership pass.
* A valid membership pass must always be carried.
* Lost membership cards will be replaced at the cost of £2.00, plus an additional photograph for the new card.
* No aerosols, spray cans or water pistols of any kind are to be brought to the Project Centre or on any trips.
* Sports equipment and all property belonging to the Project are to be treated with care and respect at all times. Members found deliberately damaging property may be excluded and will be required to pay for the damage.
* All property / clothing and valuables, including mobile phones, brought to the Project will remain the responsibility of the member to ensure its safekeeping.

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