

Dear Parent / Guardian

We are really delighted that your child/young adult will be attending the New Wine activities this year and we hope that this will prove to be a very enjoyable experience for both of you. It is our desire to welcome and include everyone, irrespective of their particular needs, wherever possible.

In order that we may include your child/young adult as fully as possible and cater for their specific needs, it would be very helpful if you could complete this form and return it to us as soon as you are able. Please complete any sections that are relevant for your child. If you have any other additional information that you feel would be useful for us to know, please add this as well. We would also be very grateful if you could include a recent photograph of your child.

If you would like to talk to us in person, we can be contacted on:

Shepton Mallet events: 020 8445 6421 (evenings) or specialkids@new-wine.org
 Newark event: 0161 406 0146* (daytime) or ourplacenorth@new-wine.org

* This is the number of the New Wine North Office who will arrange for the Special Needs Coordinator to contact you directly.

As in previous years, in addition to supporting children/ young people within their age group activities, we will be providing a special programme in 'Our Place' for those who would find this more appropriate. Details of this will be provided in the conference programme. Do come and find us, chat and join in the activities we provide.

During New Wine, if you have any difficulties please do come and discuss these with us we would love to help you and make your New Wine experience the best yet.

Yours,

Heather & Kate

Heather Holgate (Shepton Mallet) & Kate Wharton (Newark)
 Special Needs Co-ordinators

1. PERSONAL INFORMATION	
Child's Name	PLEASE ATTACH A RECENT PASSPORT PHOTO (Write name on reverse)
DOB	
School / College year / class	
Age at time of New Wine	
Parent's Name	
Address	
Postcode	
Telephone Number/s	
Email	

New Wine Event you are attending Shepton Mallet: LSE [] CSW [] Newark []

Booking Reference No. if known _____

Has your child attended a summer conference before? Yes [] No []

New Wine age group for which your child is eligible:

Gems (0-2s) [] Pebbles (3-4s) [] Ground Breakers (5-7s) [] Rock Solid (8-9s) [] Boulder Gang (10-11s) []
 Club One (12-13s) [] Thirst (14-19s) []

Do you feel this is appropriate for your child? Yes [] No []

If *not*, which age group would you like your child to attend and can you briefly give reasons for this:

Gems [] Pebbles [] Ground Breakers [] Rock Solid [] Boulder Gang [] Club One [] Thirst [] Our Place []

If more than one group please tick both e.g. Ground Breakers and Our Place

Tel. call	Comments:	[Office use only]
Letter		

Does your child have any siblings who are also attending the conference?
If yes, please could you give us details of their names and ages below

Yes [] No []

Briefly describe your child's special needs *e.g. autistic spectrum, ADHD, dyslexia, Down's Syndrome*

How do you think this might impact on their ability to participate in activities?

Does your child receive additional help at school?

Yes [] No []

If yes, what form does this take and what is the reason for this?

2. MEDICAL

A) Does your child have any medical condition that may require special action or administration of medication
e.g. seizures, gastrostomy feeding? Yes [] No []

If yes, please give details e.g. what triggers this reaction/what to look for etc

B) Does your child have any allergies e.g. foods, medication, other substances?

Yes [] No []

If yes please give details

C) What action should be taken in the event of an allergic reaction/seizure or other incident?

3. PHYSICAL

A) Does your child ever/usually use a mobility aid e.g. wheelchair, walking frame or any other special
equipment e.g. special chair? Yes [] No []

If yes, please give details

Will this be used at New Wine Yes [] No []

B) Does your child need help with toileting? Yes [] No []

If yes, what should we do to assist your child?

Do you give permission for us to assist your child in this way? Yes [] No []

C) Does your child require assistance to have a drink/snack? Yes [] No []

How should we assist them?

Do you give permission for us to assist your child in this way? Yes [] No []

D) Does your child have visual difficulties? Yes [] No []

If yes what should we do to assist your child?

E) Does your child have hearing difficulties? Yes [] No []

If yes what should we do to assist your child?

4. LEARNING

Does your child have a learning disability that may make it difficult for them to participate in any activities e.g. difficulty reading / writing? Yes [] No []

If yes what should we do to assist your child?

5. COMMUNICATION

A) Is English your family's first language? Yes [] No []

B) Does your child have difficulty with speaking? Yes [] No []

C) Does your child use an alternative or additional form of communication e.g. signing, communication book? Yes [] No []
If yes please give details

D) Is there anything about your child's communication that you would like us to know?

6. MOODS AND FEELINGS

Are there any particular situation or activities which are likely to upset or frighten your child?

Yes [] No []

If yes please give details

During difficult times what do you find is the best way of comforting and calming your child?

7. BEHAVIOUR

Is your child likely to wander/run away?

Yes [] No []

Is there anything you would like us to know about managing your child's behaviour?

Is there anything else that you would like us to know which may help us to meet your child's special needs while participating in New Wine activities? *Please continue overleaf if necessary.*

Completed by

Signature

Date

When complete please return to:

Shepton Mallet Events:

Heather Holgate, New Wine, c/o St Barnabas Church, Holden Road, London, N12 7DN

Newark Event:

Kate Wharton, New Wine, c/o Romiley Lifecentre, 1-5 Stockport Road, Romiley, Stockport, SK6 4BN