

Updated Nov 2022

Out & About Application Pack

If you are interested in applying for a place at the Out and About Project, please complete the following two forms and return them to us at office@lwca.co.uk or post to

***Leeds Weekend Care Association***

***Suite 4, Gledhow Mount Mansion, 32 Roxholme Grove, Leeds, LS7 4JJ***

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| --- |
| LWCA ‘Out & About Project’ APPLICATION FORM |
| Young Person’s Name: |  |
| Date of Birth: |  | Gender – Male / Female / Other |
| Parent /Carer Name(s): |  |
|  |
| Address: |  |
| Parent/Carer Contact Details: | Home Phone Number: |  |
| Mobile Contact 1: |  |
| Mobile Contact 2: |  |
| Emergency Contact: |  |
| Parent/ Carer Email: |  |
| Young Person’s School: |  |
| Young Person’s Lead Professional and their contact details: |  |
| Young Person’s Social worker and their contact details: |  |
| Diagnosis:EHCP – Y/N |
| Medication &/or Allergies: (Please highlight any medication to be given whilst at the scheme) Special Dietary Considerations: |
| Feeding: (Please circle) | With help | Without help |
| More info… |
| Mobility:(Please circle) | W/C User | K-Walker/Frame/Stick | Mobile |
| More info… |
| Toileting:(Please circle) | Wears pads | Assistance needed | Prompt | Independent |
| More info… |
| Speech:(Please circle) | Verbal | Non-verbal | Communication Aids/PECS | Makaton user |
| More info… |
| Behaviours: ( e.g. Active, tendency to wander/abscond, seeks attention, damages furniture, injures themself, hits out at others)  |
| Triggers for behaviours: |
| De-escalation/Calming Techniques: |
| Young Person’s Likes: |
| Young Person’s Dislikes: |
| Other Useful Info:(e.g. Worries/obsessions & skills/achievements)Which other Short Breaks does the young person access? |

Form completed by –

Parent/Carer Name & Signature –

Date form completed –





Application for Leeds Weekend Care Association – Out & About Project

Held at various activity and entertainment venues around Leeds

Fees are £10.00 - £30.00 per session, payable in advance

|  |
| --- |
| Childs name |
| Parent/carer name |
| Parent/carer email |
| Parent/carer telephone(s) |
| Which day would you prefer to attend? (Please highlight all that apply)PLEASE NOTE -Our usual trip days are Tues/Weds/Thurs but can have occasional on Mon/Fri/Sun |
| Monday | Tuesday | Wednesday | Thursday | Friday | Sunday |

Which of the following activities would you like to be invited to?

|  |  |  |
| --- | --- | --- |
| Please tick all that apply | YES | NO |
| Bowling  |  |  |
| Cinema |  |  |
| Theatre |  |  |
| Snooker/Pool  |  |  |
| Night in (youth club type activity at East End Park) |  |  |
| Stockeld Park |  |  |
| Theme park / Forbidden Corner |  |  |
| Park – e.g. Roundhay, Temple Newsam |  |  |
| Putt Stars Golf |  |  |
| Clip ‘n’ Climb |  |  |
| Laser Zone |  |  |
| Trampolining (Gravity at Kirkstall) |  |  |
| Circus |  |  |
| Yorkshire Wildlife Park |  |  |
| Ninja Warriors |  |  |

Please write below any other Ideas or suggestions that your child would be interested in -