Logo

Description automatically generated

Updated Nov 2022

Weekenders Club Application Pack

If you are interested in applying for a place at weekenders please complete the following form and return it to us at [office@lwca.co.uk](mailto:office@lwca.co.uk) or post to

***Leeds Weekend Care Association***

***Suite4, Gledhow Mount Mansion, 32 Roxholme Grove, Leeds, LS7 4JJ***

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| LWCA ‘WEEKENDERS CLUB’ APPLICATION FORM | | | | | | | | | | |
| C&YP 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: | |  | | | | | | |
| C&YP School: | |  | | | | | | | | |
| C&YP Lead Professional and their contact details: | |  | | | | | | | | |
| C&YP Social worker and their contact details: | |  | | | | | | | | |
| Diagnosis:  EHCP – Y/N | | | | | | | | | | |
| Medication: (Please highlight any medication to be given whilst at the scheme)    Allergies:  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: | | | | | | | | | | |
| C&YP Likes: | | | | | | | | | | |
| C&YP Dislikes: | | | | | | | | | | |
| Other Useful Info:  (e.g. Worries/obsessions & skills/achievements)  Are you accessing any other Short Breaks? | | | | | | | | | | |

Form Completed By –

Parent/Carer Name & Signature –

Date form completed -