

# HASTINGS SPORTS CENTRE

## GETTING STARTED (DISABILITY) REGISTRATION FORM

Has your child attended a Sports Centre run programme before?

Do you give us permission to use images of your child for promotion of Future Programmes?

### NEXT OF KIN

### EMERGENCY CONTACT DETAILS

### MEDICAL INFORMATION

Does your child have any medical conditions or allergies that we should know about?

Please provide health management plans where appropriate.

## DISABILITY INFORMATION

Please specify your child's disability type:

How does your child's disability affect them in their participation in physical activities?

Is your child dependant on a carer or helper? If so to what level? Ie. Communication, locomotion, transfers, toileting etc.

Does your child use any mobility aids? If so please specify.

If your child has the use of a wheelchair can they complete independent transfers?

## SOCIAL INTERACTION

Does your child get along well with others?

Does your child at times exude challenging behaviors? Such as: outbursts; loud, foul or abusive language; excessive crying; physical attack; or very withdrawn or non-interactive. If so, please explain.

\*If your child does exude challenging behaviors they need to be accompanied by a caregiver trained to manage these behaviors.

General Comments about your child we should know about

## SIGNATURE

Parent/Guardian

Date

## ELIGIBILITY CRITERIA

To be enrolled your child must:

- be 5-7 years of age
- have a physical and/or learning disability
- be ambulant
- have a carer present and involved if the child is dependent on them for any reason
- have their own transportation to and from The Sports Centre