

Leisure Centre <input type="checkbox"/>	Website <input type="checkbox"/>	School <input type="checkbox"/>	Library <input type="checkbox"/>	Newspaper <input type="checkbox"/>	Other <input type="checkbox"/>
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6. Ethnic Origin please tick one (You do not have to complete this question but doing so will help us improve our service)

White	Mixed	Asian or Asian British	Black British or Black	Chinese or Other Ethnic Group
British <input type="checkbox"/>	White & Black Caribbean <input type="checkbox"/>	Indian <input type="checkbox"/>	Caribbean <input type="checkbox"/>	Chinese <input type="checkbox"/>
Irish <input type="checkbox"/>	White & Black African <input type="checkbox"/>	Pakistani <input type="checkbox"/>	African <input type="checkbox"/>	Any Other <input type="checkbox"/>
Other <input type="checkbox"/>	White & Asian <input type="checkbox"/>	Bangladeshi <input type="checkbox"/>	Other <input type="checkbox"/>	
	Other <input type="checkbox"/>	Kashmiri <input type="checkbox"/>		
		Other <input type="checkbox"/>		

Swimming Ability: Please complete the following questions for activities where being able to swim is essential.

Is your child able to swim 100 metres without swimming aids? Yes No

Is your child confident in the sea or in open inland water? Yes No

Does your child suffer any medical condition, which may affect their ability to swim? If yes please specify in section 2e or 2f. Yes No

Is your child safety conscious in water? Yes No

Declarations:

I undertake to inform a member of staff of any changes in the information provided on this form. I hereby agree that in the event of my child being returned early from the activity, or any costs incurred as a result of my child's misbehaviour, I will be liable to re-imburse Leeds City Council, in full. I understand that in the event of any injury or illness all reasonable steps will be taken to contact me, and to deal with the injury / illness appropriately and that by returning this completed form I agree to my son /daughter taking part in the activity.

Consent Statement:

I give consent for my child to take part in the above activity / activities and, having received and read the information provided, agree to their participation. I acknowledge the need for obedience and responsible behaviour on their part.

I understand that some of the activities will be taking place at community Sports Clubs and that Leeds City Council cannot be made liable for any loss or injury caused to my child in my care whilst participating in activities at these Clubs. (Please tick if applicable)

Data Protection:

The information you provide on this form will be held on computer and paper files. Leeds City Council may from time to time send you information and offers about events and services provided by The Department of Learning & Leisure for promotional purposes. If you would like to receive such information please tick this box

If you give consent for your child to be photographed during the course/session please tick this box

Cancellation / Re-programming / Change in Activity:

Under exceptional circumstances, Leeds City Council reserve the right to change all or some of the above at short notice.

This should be signed by the parent / guardian if the participant is under 16.

Print Name:	Relationship to child:
Signature:	Date: