

Lambhill Stables Youth Club

Activity Details Please tick the sessions you wish to reserve for your child/young person. If your child is booked on but is no longer able to attend a day – you MUST notify staff as early as possible on 0141 945 4100. Failure to notify staff will result in losing your booking slots. Monday Wednesday Tuesday Thursday **Friday** 1.30 - 3.30pm 1.30 - 3.30 pm**TRIPS Times TBC** 1.30 - 3.30 pm1.30 - 3.30 pm**Arts & Crafts** Bike Ride **Bushcraft Fire** Week 1 TCA indoor rock climbing* Bushcraft Nature 30th Jun - 4th Jul Week 2 **Arts & Crafts** Bike Ride Flip Out* Bushcraft BBQ & Pizza Oven Beach 7th - 11th July Week 3 **Arts & Crafts** Bike Ride Bowling Waterfight* **Bushcraft Fire** Water 14th - 18th July Week 4 **Arts & Crafts** Bike Ride Pinkston water sports* Sports Day Colour Run Sports П П \Box 21st - 25th July Bike Ride **Arts & Crafts** Flipout* Comic Con **Bushcraft Fire** Week 5 Comics 28th Jul - 1st Aug Week 6 BBQ & Pizza Oven Play 4th - 8th Aug Bike Ride* - Ages 8+ MUST be confident and able to ride a bike independently, without stabilizers and rode their bike no less than 1 month prior. Long hair must be tied back, participants MUST bring a day bag and water bottle. **Bushcraft *** - Long hair must be tied back. Water Fight * - Participants MUST bring a change of clothes, shoes and towel in a bag. Day Trip: TCA* - Ages 8+ Additional consent form must be completed for activity providers, nearer to the time. Participants MUST bring a day bag and water bottle. Day Trip: PINKSTON * - Ages 8+ Additional consent form must be completed for activity providers, nearer to the time. Participants must bring swimming costume for wearing under wetsuit; wet shoes; dry bag of change of clothes; dry shoes; towel. Long hair must be tied back. Day Trip: FLIPOUT* - Ages 8+ Additional consent form must be completed for activity providers, nearer to the time. Participants MUST bring a day bag, and water bottle. I agree to my child / young person taking part in the activities outlined above. I acknowledge the need for responsible behaviour on their part. I acknowledge that Lambhill Stables cannot be responsible for personal belongings and recommend that children /young people do NOT bring valuables to sessions. Children / young people must be dropped off and collected by a parent/guardian. Parents/guardians will be met by youth workers at the door and children / young people will be signed in and out. If running late, or if an alternative family member is collecting your child(ren), please contact the office (0141 945 4100) or youth mobile phone (07538 767 561) to inform staff.

Please tick box to confirm this has been read and understood: \Box

| Child / Young Person | | | | | |
|---|-----|------|----|-------------|--|
| NAME: | | | | | |
| PREFERRED NAME TO BE KNOWN AS: | | | | | |
| PREFERRED PRONOUNS: | | | | | |
| DATE OF BIRTH: | | | | | |
| ADDRESS: | | | | | |
| POST CODE: | | | | | |
| SCHOOL YOUNG PERSON ATTENDS: | | | | | |
| | | | | | |
| Medical Information – to be completed by the paren | | dian | | | |
| Does your Child/Young Person suffer from any condition requiring medical treatment, including medication? | YES | | NO | | |
| If YES please give brief details e.g. Asthma; Diabetes | | | | | |
| | | | | | |
| Is your son/daughter allergic to any medication? | YES | | NO | | |
| If YES, please specify | | | | | |
| | | | | | |
| Does your child have any food allergies or intolerances , or dietary requirements ? | | | | | |
| If so, please list: | | | | | |
| | | | | | |
| | | | | | |
| Does your child have any behavioural needs you would like us to be aware of? | | | | | |
| If so, please list: | | | | | |
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| Emergency Contacts |
|--|
| To be completed by parent / guardian, who can be contacted in an emergency: |
| NIADAE. |
| NAME: |
| RELATIONSHIP TO YOUNG PERSON: |
| MOBILE: |
| WORK/HOME PHONE: |
| ADDRESS: |
| POST CODE: |
| Please complete the following details of ANOTHER family member or friend who can be |
| contacted in an emergency if the parent/guardian cannot be reached: |
| NAME: |
| RELATIONSHIP TO YOUNG PERSON: |
| MOBILE: |
| WORK/HOME PHONE: |
| ADDRESS: |
| |
| POST CODE: |
| Declarations |
| I agree to my child / young person receiving basic first aid from the Group Leader \Box |
| I consent to emergency medical treatment, including anaesthetic or blood transfusion, |
| as considered necessary by the medical authorities present: \Box |
| I acknowledge I may be contacted from time to time about activities at Lambhill Stables. |
| My email address is: |
| In line with GDPR, I give permission for my child's photo to be taken for use on the |
| Lambhill Stables website and/or social media site: |
| https://www.facebook.com/lambhillstablesyouth/ |
| http://www.instagram.com/lambhillstablesyouth/ |
| Please tick if you consent to your child's photo being used as stated above \Box |
| Signature of Parent/Guardian: |
| Drivet Nomes |
| Print Name: Date/ |