

Parent/Carer Registration Form – North West

By filling out this registration form, you understand and agree to your details being entered onto the Contact a Family database. This information will not be passed to any third parties without your consent and will only be used by the North West Team for the purpose of informing you about news, information and events. We may also contact you from time to time to ask if you would like to participate in our research and consultations. You can amend or remove your details whenever you wish by contacting Contact a Family at the North West Office on northwest@cafamily.org.uk

Parent/Carer

Name					
Your relationship to the children?					
How many children and young people, up to age 19, are in your family?				How many children or young people in your family have a disability or additional needs?	
Your ethnicity <i>(Please insert code from table below)</i>					
White A1: British A2: Irish A3: Other white background <i>(please specify)</i>	Black/Black British: B1: Caribbean B2: African B3: Other black background <i>(please specify)</i>	Asian/Asian British: C1: Indian C2: Pakistani C3: Bangladeshi C4: Other Asian background <i>(please specify)</i>	Of mixed race: D1: White & Black Caribbean D2: White & Black African D3 : White & Asian D4: Other mixed background <i>(please specify)</i>	Chinese: E	Any other ethnic group: F <i>(please specify)</i>

Contact details

House number		Street Name			
Town/city				Postcode	
Landline			Mobile		
E-mail					
How did you hear about us?					
Please tell us if you are part of any local support groups?					

Child or young person with a disability or additional need

Name			Gender	M	<input checked="" type="checkbox"/>	F	<input checked="" type="checkbox"/>
Ethnicity <i>(Please insert code from table above)</i>			Birth Date				
Disability or additional need							

Additional tables for children with disabilities can be found at the back of this form.

Please only fill in this part if you have additional children or young people you have not told us about.

Additional child or young person with a disability or additional need

✓ ✓

Name		Gender	M		F	
Ethnicity <i>(Please insert code from table above)</i>		Birth Date				
Disability or additional need						

Additional child or young person with a disability or additional need

✓ ✓

Name		Gender	M		F	
Ethnicity <i>(Please insert code from table above)</i>		Birth Date				
Disability or additional need						

Additional child or young person with a disability or additional need

✓ ✓

Name		Gender	M		F	
Ethnicity <i>(Please insert code from table above)</i>		Birth Date				
Disability or additional need						

Additional child or young person with a disability or additional need

✓ ✓

Name		Gender	M		F	
Ethnicity <i>(Please insert code from table above)</i>		Birth Date				
Disability or additional need						

Our details can be found on our national website at www.cafamily.org.uk
 Our free helpline is open Monday to Friday 9.30am to 5pm on 0808 808 3555.

Thank you for filling in this form and Welcome to Contact a Family North West. Please hand in your completed form to a member of staff, scan and e-mail to northwest@cafamily.org.uk or post it to:

**North West Registration,
 Contact a Family,
 209-211 City Road,
 London, EC1V 1JN**