



# the 131 CLUB

Thank you for your interest in our 131 Club. Our club is open 5 days a week from 10am-2pm. Please give us a few more details about you so we can make sure you get the best out of the club.

## Contact Details

Name.....

Address.....

Phone Number.....

Email Address.....

## Personal Information

Age..... DOB.....

Gender..... Ethnicity.....

Next of Kin Contact Details .....

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## More About You

Do you have any special dietary needs, like diabetes, allergies, vegan, or vegetarian?

Do you have any disabilities, mobility, or health conditions? We need this information so we can make sure your time at the club is comfortable and you can access all of our centre's facilities

Are you living with Dementia? Y/N If yes please tell us more about the daily support you need

What type of activities and hobbies do you enjoy?

Please sign to consent to this information being shared with the Be Well Staff so we can process your registration form. We won't share this information with anyone else and will keep it safe and secure in line with our GDPR policies. If you decide not to register with us, we will safely dispose of it.

Name.....

Signature.....

Date.....