



If you need help lodging your form, contact us	
Email	Disability.Services@northernbeaches.nsw.gov.au
Phone	1300 434 434
Customer Service Centres	Manly Townhall, 1 Belgrave Street Manly NSW 2095
	Dee Why Civic Centre, 725 Pittwater Road Dee Why NSW 2099
Customer Service Centres	Mona Vale 1 Park Street Mona Vale NSW 2103
	Avalon 59A Old Barrenjoey Road Avalon Beach NSW 2107

Office use only	
Form ID	2018
TRIM Ref	
Last Updated	4 September 2017
Business Unit	Community Arts & Culture

Privacy Protection Notice	
Purpose of collection:	For Council to provide services to the community
Intended recipients:	Northern Beaches Council staff
Supply:	If you choose not to supply your personal information, it may result in Council being unable to provide the services you seek
Access/Correction:	Please contact Customer Service on 1300 434 434 to access or correct your personal information

Part 1: Participant Details

Title	Mr	Mrs	Ms	Other	
Full Name					
Living Situation					
Address					
Name on Medicare Card				Medicare Card Number	
Date of Birth (dd/mm/yyyy)				Phone	

Part 2: Primary Contact Person (in case of emergency - parent or group home contact)

Title	Mr	Mrs	Ms	Other	
Full Name					
Address					
Relationship					
Phone (Home)				Phone (Mobile)	
Email					

Part 4: Medical Conditions, Allergies & Fears/Triggers

Does the participant have any MEDICAL CONDITIONS we should know about? Eg. Asthma, epilepsy etc
Does the participant have any ALLERGIES we should know about? If the reaction is severe, please describe below.
Does the participant have any specific FEARS or TRIGGERS we should know about? Eg. Flashing Lights, Loud Noise, Animals

Part 5: Duty of Care & Signatures

Please indicate who will be picking up your child at the end of the evening. Due to Duty of Care participants cannot be permitted to make their own way home or go with unauthorised persons unless over 18. If contacted and requested to attend the Centre to pick up the participant, parents/guardians MUST do so immediately.			
Parent/Guardian OR		Other	
If contacted and requested to attend the Centre to pick up the participant, parents/guardians MUST do so immediately.			
Name		Relationship	
Signature		Date	