

Blessing in Disguise

Return completed form to:

Blessing in Disguise
 Head Office
 4 Higher Landedmans
 Westhoughton
 Wigan
 BL5 2PY

OFFICE USE ONLY:

Initials

Date Received:		
Date Assessed:		
Recommendation:	Approve / Decline	
Director Decision:	Approved / Declined	
B.I.D. Ref:	BIDSWIM	

SWIM-ABILITY APPLICATION FORM								
Decisions are dependent on funding, strictly first come first served basis.								
ALL sections of this form MUST be completed in FULL or may be deemed void and returned unprocessed.								
B.I.D. considers a family to consist of dependent children and those who care for them. Carers can be parents, grandparents, guardians and others with caring responsibilities.								
Section 1								
Contact Details of Family								
Parent Name:	<input style="width: 90%;" type="text"/>							
Address:	<input style="width: 90%;" type="text"/> <input style="width: 90%;" type="text"/> <input style="width: 90%;" type="text"/>							
Post Code:	<input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/> <input style="width: 15%;" type="text"/>							
Tel. Home:	Mobile: <input style="width: 80%;" type="text"/>							
Email:	<input style="width: 90%;" type="text"/>							
Section 2								
Meeting Our Criteria (Eligible criteria must be met in order for equipment to be granted)								
The child listed in Section 4 must be aged 19 or under at the time of the equipment granted (unless approved by B.I.D.) Family must be on a low income and in receipt of one/more of the following: please tick all that apply.								
<input type="checkbox"/>	Child Benefit	<input type="checkbox"/>	Working Tax Credit	<input type="checkbox"/>	Council Tax Benefit	<input type="checkbox"/>	Other	<input type="checkbox"/>
<input type="checkbox"/>	Housing Benefit	<input type="checkbox"/>	Income Support	<input type="checkbox"/>	Job Seekers Allowance (JSA)	<input type="checkbox"/>		
<input type="checkbox"/>	Disability Living Allowance (DLA)	<input type="checkbox"/>	Disabled Students Allowance (DSA)	<input type="checkbox"/>				
Section 3								
Details of person with illness / disabilities / special needs								
Child's Full Name:	<input style="width: 70%;" type="text"/>							
Child's Age & DOB:	<input style="width: 70%;" type="text"/>							
Please explain in detail, special needs/disability & any additional requirements								
Current Nursery/School/College								

Level of Swimming ability and any special requirements	
Non-swimmer	
Proficient swimmer	

Non-swimmers will require 1:1 support in the water
 Proficient swimmers will require 1:2 support (one adult to 2 children)
 Any child under the age of 8 years will require adult supervision in the water.

Are you or another responsible adult able to enter the pool to support the child at the swim-ability session? **Y / N**

We are looking to start the disabled swim sessions in the very near future. We currently have a time slot for Wednesdays 11am-12pm for exclusive use of the pool. Places will be limited, with the hope of having additional time slots once the swim-ability club is established.

If you would like to be considered for a place, please complete and return this form. Further information may be required before a place is confirmed.

Name:

Print:

Sign:

Date:

Thank you for your information. Please return this completed application form to B.I.D.:

Blessing in Disguise (BID) is a company limited by guarantee and registered in England.
 Registered Company No: 8790053 Registered Charity No: 1161139
 Registered Office: 4 Higher Landedmans, Westhoughton. BL5 2PY.
 Fellow Member of S.S.E. Associate Member of S.F.E.D.I. & I.O.E.E.