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| **REGISTRATION FORM – Version 1**  **DISABILITY SPORT FIFE IN PARTNERSHIP WITH FIFE COUNCIL AND THE FIFE SPORTS & LEISURE TRUST**  **Incorporating registration for the Get Out and Get Active Programme (GOGA)** | | | | | | | | |  | **What is your sex?** | | | | | Male ☐ | | | | | | | | | | | | | Female ☐ | | | | | | | | | | | Other ☐ | | | | | |
| Name |  | | | | | | | | **What is your age?** | | | | | 8-14 yrs ☐ | | | | | | | | | 15-30 yrs ☐ | | | | | | | 31-50 yrs ☐ | | | | | 51-64 yrs ☐ | | | | | | 65 + yrs ☐ | | |
| **Do you have any of the following physical, sensory, learning or mental health conditions, or illnesses that have lasted, or are expected to last, 12 months or more?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address |  | | | | | | | |
| Vision | | | | | | | | | | | | | | | | | ☐ | Difficulty speaking/ making yourself understood | | | | | | | | | | | | | | | ☐ | |
| Hearing | | | | | | | | | | | | | | | | | ☐ |
| Mobility | | | | | | | | | | | | | | | | | ☐ | Dexterity difficulties | | | | | | | | | | | | | | | ☐ | |
| Postcode |  | | | | Date of birth | |  | | Learning/concentrating/remembering | | | | | | | | | | | | | | | | | ☐ | Long-term pain or discomfort | | | | | | | | | | | | | | | ☐ | |
| Telephone | (h) |  | | | (mob) |  | | | Mental Health | | | | | | | | | | | | | | | | | ☐ | Asthma | | | | | | | | | | | | | | | ☐ | |
| Email |  | | | | | | | | Stamina or breathing difficulty | | | | | | | | | | | | | | | | | ☐ | Diabetes | | | | | | | | | | | | | | | ☐ | |
| School/Club/Etc |  | | | | | | | | Social or behavioural issues | | | | | | | | | | | | | | | | | ☐ | Epilepsy | | | | | | | | | | | | | | | ☐ | |
| Emergency Contact Name | | |  | | | | | | Impairment  details | |  | | | | | | | | | | | | | | | | Don’t know | | | | | | | | | | | | | | | ☐ | |
| Emergency Tel. | | |  | | | | | | Prefer not to say | | | | | | | | | | | | | | | ☐ | |
| Previous experience of physical activity including sport | | |  | | | | | | **If yes, do any of these physical, sensory, learning or mental health conditions have an effect on your ability to carry out normal daily activities?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | ☐ | | | | | | | | | | | | | | No | | | | ☐ | | | | | | | | | Don’t know | | | | | | ☐ |
| **Please Read** | | | | | | | | | **How is your health in general would you say it was?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Personal information will be treated in line with the Data Protection Act of 1998. Information provided may be shared for the purposes of audit, research or put together with other surveys, but when we do this, your confidentiality is always maintained. Personal data will not be made public in any way which identifies individuals. | | | | | | | | | Very Good | | ☐ | | | | | | | | | Good | | | | | | | ☐ | | | | | | | Fair | | | | | | | | | ☐ |
| Bad | | ☐ | | | | | | | | | Very Bad | | | | | | | ☐ | | | | | | | Prefer not to say | | | | | | | | | ☐ |
| **Which one of the following best describes your ethnic group or background?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| White | | | | | | | | | | | | | | | | | ☐ | Black/Africa/Caribbean/Black British | | | | | | | | | | | | | | | ☐ | |
| Mixed/Multiple ethnic group | | | | | | | | | | | | | | | | | ☐ | Other Ethnic Group | | | | | | | | | | | | | | | ☐ | |
| Form completed by (please print) | | | |  | | | | | Asian/Asian British | | | | | | | | | | | | | | | | | **☐** | Prefer not to identify | | | | | | | | | | | | | | | **☐** | |
| Participant Signature: | | | |  | | | | | **What is your religion, even if you rare not currently practising?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature on behalf of Participant:  *(if completed on behalf of participant)* | | | |  | | | | | Church of England | | | | ☐ | | | | | | Roman Catholic | | | | | | | | | | ☐ | | | | Protestant/ Other Christian | | | | | | | | | | ☐ |
| Buddhist | | ☐ | | | | | | | Hindu | | | | | | | ☐ | | | | | | Jewish | | | | | ☐ | | | | Muslim | | | ☐ |
| Date | | | |  | | | | | Sikh | ☐ | | No religion | | | | | | | | | | ☐ | | | | Don’t know | | | | | | ☐ | | | | | | | Prefer not to say | | | | ☐ |
| **As part of the evaluation of GOGA, would you be willing to participate in a future survey?** Yes ☐ | | | | | | | | | Any other religion | | | | | | ☐ | | Please specify | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| **What is your current working status?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Current level of activity:** In a typical week, on how many days have you been physically active which was enough to raise your breathing rate for at least 10 mins, and at least 30 mins? | | | | | | | | | Working full-time (30+ hrs per week) | | | | | | | | | | | | | | | | | ☐ | Not working - carer | | | | | | | | | | | | | | | ☐ | |
| Working part-time 9-12 hrs per week | | | | | | | | | | | | | | | | | ☐ | Not working – long term sick or disabled | | | | | | | | | | | | | | | ☐ | |
| Unemployed – less than 12 months | | | | | | | | | | | | | | | | | ☐ | Full-time study – recognised qualification | | | | | | | | | | | | | | | ☐ | |
| Number of Days of at least 10 mins of physical activity | | | | | *(Write number of days)* | | |  | Unemployed – more than 12 months | | | | | | | | | | | | | | | | | ☐ | Part time study – recognised qualification | | | | | | | | | | | | | | | ☐ | |
| Not working – retired | | | | | | | ☐ | | | | | Other (please specify) | | | | | | | | | | |  | | | | | | | | | | | |
| Number of Days of at least 30 mins of physical activity | | | | | *(Write number of days)* | | |  | **Which of the following options best describes how you think of yourself?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bisexual | | | | | | | ☐ | | | | Gay Man | | | | | | | | | | | | ☐ | | Gay woman/lesbian | | | | | | | | | ☐ |
|  | | | | | | | | | Heterosexual/straight | | | | | | | ☐ | | | | Prefer not to say | | | | | | | | | | | | ☐ | | Other | | | | | | | | | ☐ |

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| **SPORT** | **VENUE** | **DAY** | **TIME** | **START DATE** | **FINISH**  **DATE** | **DESCRIPTION** | **TARGET AGE** | **COACH(ES)**  **CONTACTS** | **tick** |
| **Athletics** | Pitreavie, Dunfermline | Tuesday | 16.30-17.30 | Jan | Dec | Run, jump and throws session | 12+ years | P Robson/G Doig |  |
| Madras, Kilrymont, St Andrews | Wednesday | 15.30-16.30 | Jan | Dec | Run, jump and throws session | 10+ years | Stuart Munn |  |
| Michael Woods Centre, Glenrothes | Wednesday | 16.30-17.30 | Jan | Dec | Run, jump and throws session | 12+ years | Pamela Robson |  |
| Pitreavie, Dunfermline | Thursday | 16.30-17.30 | Jan | Dec | Physical and sensory impaired athletes only | 6+ years | P Robson/G Sloan |  |
| Pitreavie, Dunfermline | Thursday | 17.30-18.30 | Jan | Dec | Wheelchair racing training | 6+ years | Pamela Robson |  |
| **FUNdamentals** | Michael Woods Centre, Glenrothes | Monday | 18:00-19:00 | Jan | Dec | Children with a physical/visual impairment only | 6+ years | Alex Bird |  |
| Carnegie Centre, Dunfermline | Wednesday | 17.00-18.00 | Jan | Dec | Children with a physical/visual impairment only | 6+ years | Alex Bird |  |
| **Multi-Sports** | Michael Woods Centre, Glenrothes | Monday | 19.00-20.00 | Jan | Dec | Short tennis, table tennis and basketball | 12+ years | Alex Bird/Euan Bell |  |
| **Boccia** | Michael Woods Centre, Glenrothes | Monday | 19.00-20.00 | Jan | Dec | Power/manual wheelchair users only | 10+ years | DSF Volunteers |  |
| **Badminton** | Michael Woods Centre, Glenrothes | Monday | 20.00-21.00 | Jan | Dec | Players of all levels of ability | 15+ years | Alex Bird/Euan Bell |  |
| Cowdenbeath Leisure Centre | Tuesday | 14.15-15.15 | Sept | Dec | Players of all levels of ability | 15+ years | Julie Hogg |  |
| **Swimming** | Michael Woods Centre, Glenrothes | Tuesday | 16.00-16.30 | Jan | Dec | Learners with a physical or visual impairment - 3 | 6+ years | FSLT staff |  |
| Kirkcaldy Leisure Centre | Wednesday | 16.30-17.30 | Jan | Dec | Swimmers with a disability | 12+ years | Gabby Doig |  |
| Michael Woods Centre, Glenrothes | Wednesday | 17:00-17:30 | Jan | Dec | Learners with a physical or visual impairment - 1 | 6+ years | FSLT staff |  |
| Michael Woods Centre, Glenrothes | Wednesday | 17.30-18.00 | Jan | Dec | Learners with a physical or visual impairment - 2 | 6+ years | FSLT staff |  |
| Michael Woods Centre, Glenrothes | Wednesday | 17.00-18.00 | Jan | Dec | Swimmers with a disability | 8+ years | Anna Tizzard |  |
| Michael Woods Centre, Glenrothes | Wednesday | 11.30-12.30 | Jan | Dec | Swimmers with a disability | 15+ years | Kathy Bijak |  |
| Cowdenbeath Leisure Centre | Wednesday | 12.00-13.00 | Jan | Dec | Adult learners with additional support needs | 18+ years | Lynsey Pretswell |  |
| Cowdenbeath Leisure Centre | Wednesday | 13.15-14.15 | Jan | Dec | Swimmers with a disability | 15+ years | Lynsey Pretswell |  |
| Michael Woods Centre, Glenrothes | Thursday | 14.00-15.00 | Jan | Dec | Adult learners with additional support needs | 18+ years | Hamish Macunn |  |
| Carnegie Centre, Dunfermline | Thursday | 17.00-18.00 | Jan | Dec | Swimmers with a disability | 12+ years | Kay Maxwell |  |
| **Gymnastics** | Enigma Gymnastics Club, Buckhaven | Sunday | 09.00-10.00 | Jan | Dec | Junior learners with Down Syndrome | 3-4 years | Jennifer Mann |  |
| Enigma Gymnastics Club, Buckhaven | Sunday | 10.00-11.00 | Jan | Dec | Junior learners with Down Syndrome | 5-8 years | Jennifer Mann |  |
| Enigma Gymnastics Club, Buckhaven | Monday | 18.00-19.00 | Jan | Dec | Junior learners with Down Syndrome | 6-7 years | Jennifer Mann |  |
| Enigma Gymnastics Club, Buckhaven | Monday | 19.00-20.00 | Jan | Dec | Junior learners with Down Syndrome | 8+ years | Jennifer Mann |  |
| **Fitness Gym** | Kirkcaldy Leisure Centre | Thursday | 17.00-18.00 | Jan | Dec | Gym session - young adults with a disability | 14+ years | KLC Gym Team |  |
| Michael Woods Centre, Glenrothes | Wednesday | 17.00-18.00 | Jan | Dec | Gym session - young adults with a disability | 14+ years | MWC Gym Team |  |
| **Multi-Sports** | Michael Woods Centre, Glenrothes | Wednesday | 19.30-21.00 | Jan | Dec | ASN multi-sports session | 15+ years | FSLT staff |  |
| Michael Woods Centre, Glenrothes | Thursday | 10.30-12.00 | Jan | Dec | ASN multi-sports session | 15+ years | P Robson/G Sloan/  K Shields |  |
| **Walking Football** | Kirkcaldy Leisure Centre | Friday | 14.00-15.00 | Jan | March | Players with severe/complex needs | 12+ years | David Costello |  |
| **Bowls** | Headwell BC, Dunfermline | Thursday | 13.00-14.15 | Jan | Dec | Players of all levels of ability | 15+ years | Chris Osborne |  |
| Dovecot Park BC, Glenrothes | By arrangement | | Apr | Sept | Players of all levels of ability | 15+ years | M & J Mowat |  |
| Lundin BC, Lundin Links | By arrangement | | Apr | Sept | Players of all levels of ability | 15+ years | Jan Kerr |  |
| Abbeyview BC, Dunfermline | By arrangement | | Jan | Dec | Players of all levels of ability | 15+ years | Sarah Jane Ewing |  |
| **Club Football** | Glenrothes Strollers | Saturday | 12.00-14.00 | Jan | Dec | Players with a physical, sensory or learning disability | 16-28 seniors  11-16 juniors | Contact –  John Buchanan |  |
| Pars Foundation – Masterton Pr Sch | Friday | 16.15-17.15 | Jan | Dec | Frame football for players with a physical impairment | Junior | Kelly Armstrong |  |
| **Cycling** | Lochore Meadows Country Park | Tuesday | 17.45-18.45  19.00-20.00 | Apr to Oct (£3) | | Learner to intermediate cyclists | 14+ years | Contact –  Allan Dunlop |  |
| **Tennis** | Dunfermline Tennis Club | Booking by arrangement | | Jan | Dec | Coach led session | 14+ years | Alan Russell |  |
| Newport Tennis Centre | Booking by arrangement | | Jan | Dec | Coach led session | 14+ years | Andy Thompson |  |
| Falkland Tennis Club | Booking by arrangement | | May | August | Coach Led session | 14+ years | Euan Bell/Raj Vaid |  |
| **Snr Multi-sports** | Lochgelly Disability Sports Club, Lochgelly High School | Thursday | 19.00-21.00 | School terms | | Multi-sports ASN session | 15+ years | Contact Sheena Clements |  |
| **Coastal Rowing** | St Andrews and other venues | Daylight hrs | Subject to tide | May to Sept | | Participants with a disability | 18+ years | Julie Hardisty |  |

DSF provides coaches/teachers/volunteers for each session. It is the responsibility of participants to provide personal assistance where required. Sessions are available to participants with a physical, sensory (hearing/visual) or learning disability. Participants must register with the DSF Administrator before attending sessions. Session charges vary but £3.20 for juniors and £4.50 for adults are the norm.

For further details contact: Norma Buchanan, Administrator Disability Sport Fife, Michael Woods Sports & Leisure Centre, Viewfield, Glenrothes KY6 2RD T: 03451 555555 Ext. 444989

E: [norma.buchanan@fife.gov.uk](mailto:norma.buchanan@fife.gov.uk) Website [www.fifeleisure.org.uk](http://www.fifeleisure.org.uk) (find us in the Health Programmes section) DSF on Facebook   [www.facebook.com/disabilitysportfife](https://fcmail.fife/owa/redir.aspx?C=vnWVLiZae6Gz69JKFpY3Fkxn-K9k5kS3gkNeFI3OEo4TCPWNAqfTCA..&URL=http%3a%2f%2fwww.facebook.com%2fdisabilitysportfife) Jan 2018 V1