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**Application form to have a Gig Buddy**

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| --- | --- |
|  | Your name: |
| Icon  Description automatically generated | Do you have a learning disability and/or autism?  Yes No |
|  | Your date of birth: |
| Layout in table cell  Envelope_write_compact | Your address: |
|  | Your telephone numbers:  Home:    Mobile: |
|  | Your email address: |
| A picture containing text  Description automatically generated | What is the best way for us to contact you?  Phone  Email  Speak to my family, support worker or carer |
| Two people sitting at a table  Description automatically generated with medium confidence | Please tell us the contact details for your family, support worker or carer:  Name………………………………………………………………………………..  Phone………………………………………………………………………………. |
|  | What do you hope to get out of having a gig buddy? |
|  | What music are you into? (this could be types of music, like ‘rock’ or bands / singers) |
|  | What are your hobbies? |
|  | Do you have any preferences about the person you are matched with (age, gender, interests)? |
|  | Please tell us about your home. Please tick the box next to where you live.   * I live in my own home * I live with my family * I live in supported living or residential care |
|  | Do you have any specific health needs (for example, epilepsy)? Would your buddy need any special training to help you with this? |
|  | Is there anything else that your buddy will need to know about support that you need? |
| A picture containing red, bin  Description automatically generated | **Please send this form to:**  Let’s Go Out @ Northdale  Yafforth Road  Northallerton  DL7 0LQ  Or email: breathingspace@northdale.org.uk |