



O blaidd gwell
iechyd meddwl
For better
mental health



Name:	
Organisation:	Position
Address:	
Postcode:	
Telephone:	Mobile:
Email	

Please note, free and reduced cost ASIST places are available only to Bridgend county based beneficiaries

I confirm I live in Bridgend county Yes No
 I confirm I work in Bridgend county Yes No

Please number which dates you prefer in order of preference (eg 1, 2, 3, 4)

July 22/23		Sept 16/17		Nov 4/5July		Dec 2/3	
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My group/organisation:

	Type	Tick
A	Individual community member / Bridgend county resident	
B	Third sector/ voluntary/community organisation	
C	Public/statutory sector	
D	Private organisation	
E	Other (please state)	

Tea/coffee will be provided, however lunch is not included.

I have specific additional/access requirements as follows :.....

Payment

I enclose a deposit for	£	Cheques payable to:	BAVO
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Please note

- A refundable deposit of £20 (non-refundable for non attendance) per person is required for each booking category
- Confirmation of your booking will be sent to you

The information I have provided is correct and I understand the conditions of the booking.

Signed _____ date: _____

Please return to: Claire Foster, Siaradwn Ni Coordinator,
 BAVO, 112-113 Commercial Street,
 Maesteg CF349DL
 Tel: 01656 810400 or email: clairefoster@bavo.org.uk



This Form will be used for monitoring purposes.

As part of our project's equal opportunities policy, we need to get an accurate idea of which groups we are reaching and which we are missing. It would greatly assist us if you would complete this form. The information you provide will form part of our statistics and will be regarded as strictly confidential. If you prefer, you can copy and return this in a separate envelope so that it is completely anonymous. We would really appreciate your co-operation.

Language

Is your first/preferred language: Welsh English Other (please state).....

Nationality

Are you: Welsh English Irish Scottish
 Other European (please state)..... Non European (please state).....

Ethnicity / Cultural background

Is your ethnic origin: White European Asian or Asian British
 Mixed Black or Black British Chinese
 Other If you feel that none of the above categories apply to you, please state how you define yourself

Do you have experience of mental distress or of using mental health services?

Yes No Prefer not to say

Would you describe yourself as disabled? Yes No Prefer not to say

If disabled, please state nature of disability.....

Do you identify as? Heterosexual Gay Prefer not to say

Or use this box to write your preferred description

Do you identify as ? Male Female Prefer not to say

Are you on a low income? Yes No Prefer not to say

Age:

Under 18 18-25 26-33 34-41
 42-49 50-57 58-64 65+

Home location:

City Town Rural/Valley

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