

**Camp Whizz-Kidz**  
**APPLICATION FORM**



Camp Whizz-Kidz is a two night/three day residential life skills camp for young people aged 12-25, who have a physical disability and use a wheelchair.

Please note by completing the application you are expressing an interest in Camp and a more detailed application process will need to take place with our Care Officer before a place is confirmed to ensure that Camp is suitable for you. Unfortunately we are sometimes unable to offer a place on Camp if one is not available in your region.

**Only fill in this section if you want to apply for a place at Camp Whizz-Kidz.**

|            |                     |
|------------|---------------------|
| Your name: | Your date of birth: |
|------------|---------------------|

For each of these statements, please choose a level of how much you agree.

**At Camp I am hoping to:**

|   | Strongly disagree        | Disagree                 | Not sure                 | Agree                    | Strongly agree           |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Meet new friends and spend time with new people                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Become more confident in a group of people                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Become more confident about being away from home                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Become more independent with directing and/or managing my own personal care | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Increase my creativity through a range of creative activities               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learn new skills such as drama and music                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learn to communicate more effectively                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have fun playing games and being involved in sport                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have space and time to relax and chill out on my own and with my peers      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learn more about the media  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learn how to stay healthy   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Develop team working skills   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learn about the process of booking a holiday                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learn to use my wheelchair more effectively                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learn life skills and household tasks                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|  | Strongly disagree        | Disagree                 | Not sure                 | Agree                    | Strongly agree           |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Learn to budget and manage my money/benefits | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Learn more about driving and Motability      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Have you ever stayed away from home without your family?\***

- Yes
- No

*If yes, where has this been:*

**Please tell us about any other skills you would like to learn. What are the main things you want to achieve from Camp?\***