



for Southampton Parents/Carers of Children  
with disabilities/special needs

# Southampton A-buzz Parent Carer Forum

TO ALL PARENT CARERS LIVING IN SOUTHAMPTON CITY BOUNDARIES

Apologies for having to complete another form!! Feel free to send these details by email , OR phone us if you prefer. We want to be able to contact you independently of the main Buzz Network so we can give you factual, timely information that is purely *in the interests of parents* and independent of other organisations.

Name of Parent carer(s)	
Please indicate below if any applicable. I am a relative with care Yes <input type="checkbox"/> No <input type="checkbox"/> I am a Foster Carer Yes <input type="checkbox"/> No <input type="checkbox"/> Adoptive Parent Yes <input type="checkbox"/> No <input type="checkbox"/>	
Address	
Postcode: SO	
Telephone Numbers: landline 023 80	Mobile: 07
Email address:	@
<b>Name of child(ren) with disability/special needs</b>	
<b>Child 1 Full Name</b>	
Date of birth	
<b>Type of disability/special needs</b>	
Autistic spectrum <input type="checkbox"/> Down's Syndrome <input type="checkbox"/> Brain Injury <input type="checkbox"/> Hearing impairment <input type="checkbox"/>	
Visual impairment <input type="checkbox"/> Hearing impairment <input type="checkbox"/> Physical disability (with no learning disability) <input type="checkbox"/>	
ADD/ADHD <input type="checkbox"/> SEBD <input type="checkbox"/> Cerebral Palsy (all types) <input type="checkbox"/> Complex health/Life limiting condition <input type="checkbox"/>	
No Diagnosis <input type="checkbox"/> Other (please list)	
<b>Child 2 Full Name</b>	
Date of birth	
<b>Type of disability/special needs</b>	
Autistic spectrum <input type="checkbox"/> Down's Syndrome <input type="checkbox"/> Brain Injury <input type="checkbox"/> Hearing impairment <input type="checkbox"/>	
Visual impairment <input type="checkbox"/> Hearing impairment <input type="checkbox"/> Physical disability (with no learning disability) <input type="checkbox"/>	
ADD/ADHD <input type="checkbox"/> SEBD <input type="checkbox"/> Cerebral Palsy (all types) <input type="checkbox"/> Complex health/Life limiting condition <input type="checkbox"/>	
No Diagnosis <input type="checkbox"/> Other (please list)	
<b>Child 3 Full Name</b>	
Date of birth	
<b>Type of disability/special needs</b>	
Autistic spectrum <input type="checkbox"/> Down's Syndrome <input type="checkbox"/> Brain Injury <input type="checkbox"/> Hearing impairment <input type="checkbox"/>	
Visual impairment <input type="checkbox"/> Hearing impairment <input type="checkbox"/> Physical disability (with no learning disability) <input type="checkbox"/>	
ADD/ADHD <input type="checkbox"/> SEBD <input type="checkbox"/> Cerebral Palsy (all types) <input type="checkbox"/> Complex health/Life limiting condition <input type="checkbox"/>	
No Diagnosis <input type="checkbox"/> Other (please list)	

**How would you like to receive information?**

Email Yes  No   
Text Yes  No   
Post Yes  No   
None: Yes  I wish to opt out of regular information mailing

**School:** My child is in special school Yes  No

Great Oaks  Cedar  Springwell  Polygon  Vermont  Rosewood  Hope Lodge

Other: \_\_\_\_\_

My child is in mainstream school:

Yes  No  Please tell us which school: \_\_\_\_\_

**Early Years: My child uses:-**

A private nursery Yes  No

Sure Start Centre if yes, which one? \_\_\_\_\_

Opportunity Group Yes  No

Other \_\_\_\_\_

If you'd like to know more about the Forum, and think about joining us please indicate here and we will contact you. Yes  send me details

If you'd like to volunteer to become a parent to parent advisor/support, please tick here and we will send you more details. Yes  send me details

Would you like advice/support from a parent volunteer advisor?  
Yes  No

If yes, please give us more details here or contact us.

**Statement from the Southampton A-buzz Parent Carer Forum:**

As parents ourselves we take protection of children and parents' details extremely seriously. We will NEVER pass on your details to a third party. Presently your data will be kept on spreadsheets but encrypted. Only the Chair of the A-buzz Forum has access to all data. We will endeavour at all times not to overload you with information/bits of paper and forms. We hate it too!

We will protect your data and never use portable data sticks or keep it on a laptop.

\*If you wish to opt out at any time you can do so by contacting us.

We have asked for the nature of your children's special needs is that occasionally we have access to urgent information on a specific disability, e.g. autism so we can send only to the relevant families. We also have information for foster carers, relatives with care etc. This is in response from feedback in the Buzz Network survey.

We also will try to visit schools/early years settings so you can access face to face sessions/advice. We will still continue to work closely with the Children & Young People's Information Service Buzz Network co-ordinator to ensure that all our information has a sensible and co-ordinated approach.

**Send form in the attached envelope which will be passed onto us unopened, OR email/phone us.**

**023 80 230464, [info@sotonabuzz.org](mailto:info@sotonabuzz.org)**