**Virtual Parenting in a Pandemic Group**

**Parent/Carer Request to Attend Form**

***Some Notes for attendees:***

The group will run via Teams, for 1hr 30mins over a 4 week period and explore parenting experiences, managing children’s behaviours and how we can achieve personal & family wellbeing. A 5th session will be offered 4-6 weeks after session 4.

Once we have received your request form, we will contact you to provide further details and confirm your attendance.

Couples are more than welcome to request to attend together.

**Child’s Details – please complete all fields**

|  |  |
| --- | --- |
| **Name** |  |
| **Date of Birth** |  |
| **School** |  |
| **Address**  **Postcode** |  |

|  |
| --- |
| **Who is completing this ‘Request to Attend’ form?**  ParentGuardianGPHealth Visitor Teacher |

**Parents Details – please complete all fields**

|  |  |
| --- | --- |
| **Name** |  |
| **Email** | ***Please note, this will be used to set up the teams invite*** |
| **Phone Number** |  |
| **Address**  (If different to child/young person)  **Postcode** |  |

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| **Who lives at home?** |
| **Who are your support network?** |
| **Relevant Family History e.g learning difficulties, mental health needs:** |

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| --- |
| **Can you tell us more about your child/children?** |
| **What positive strategies do you already use with your child/children?** |
| **What do you find challenging about family life?** |

**Please provide some information relating to why you would like to attend**

**this group and what you hope will be included/covered in the content:**

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***Please Return this form to via email or post to:***

***Sian Thomas Occupational Therapist***

[SBU.OTParentgroup@wales.nhs.uk](mailto:SBU.OTParentgroup@wales.nhs.uk)

***Paediatric Occupational Therapy Service***

***Neath & Port Talbot Children’s Centre***

***Neath & Port Talbot Hospital***

***Baglan Way***

***Port Talbot***

***SA12 7BX***

***Telephone: 01639 507351***