



**SILVER SURFERS @ BEDFORD**  
**REGISTRATION FORM**

Please complete the following form the first time that you attend the centre.  
(Block Capitals please)

**Name of Centre** \_\_\_\_\_

**Start Date** \_\_\_\_\_

**Name**      **Family Name** \_\_\_\_\_

**First Name(s)** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Post Code** \_\_\_\_\_

**Telephone Number & Email** \_\_\_\_\_  
(Mobile and email address if you have one)

**Monitoring Information. *Please circle correct options.***

**Gender**                      Male/Female  
**Age Band**                    50-64 / over 65  
**BPHA Tenant**                Y/N

**Ethnic Origin**      I would describe my ethnic origin as:

<b>White</b>	<b>Asian or Asian British</b>	<b>Black or Black British</b>	<b>Chinese</b>	<b>Other</b>
British	Indian	Caribbean		
Irish	Pakistani	African		
Other	Bangladeshi	Other		

Prefer not to say

**Do you have a disability?**              Y/N

**Special Interests/Hobbies**

Please indicate areas of interest to you, e.g. shopping, puzzles, travel, photography, needlework, languages etc.

**Have you been to Silver Surfers before?**  
**How did you hear about Silver Surfers?**