

Database Form

About You

(Please complete the appropriate details)

Name(s).....

Name of Organisation..... Job Title.....

Address.....

.....

.....

Postcode..... Telephone.....

E-mail Address.....

(Including an email address saves us time and postage costs. You will also receive more up-to-date bulletins when available.

Please remember to inform us of any email changes!)

Your Connection with ASD

(Please tick as many as apply)

Self..... Parent/Guardian Other Family..... Friend..... Partner..... Professional..... Other (Specify).....

Further Details

It is useful to be able to produce statistics for specific projects. We would appreciate you giving us details of the people you care for with an ASD. No personal information is ever shared.

1st Name..... Date Of Birth..... Relationship.....

Diagnosis..... Is the person in full or part-time employment? Yes..... No.....

Educational Establishment Attending..... Mainstream or Specialist (Delete one)

2nd Name..... Date Of Birth..... Relationship.....

Diagnosis..... Is the person in full or part-time employment? Yes..... No.....

Educational Establishment Attending..... Mainstream or Specialist (Delete one)

3rd Name..... Date Of Birth..... Relationship.....

Diagnosis..... Is the person in full or part-time employment? Yes..... No.....

Educational Establishment Attending..... Mainstream or Specialist (Delete one)

Please include/update my details on the database of the South Lanarkshire branch of The National Autistic Society, so I may receive regular newsletters and updates by post and/or e-mail.

The information contained in this form will be held under the terms of the Data Protection Act. Details are used for NAS/branch purposes only and will not be passed onto any third party. When completed, please sign below and return this form to:

South Lanarkshire NAS, 9 Halfmerk North, Maxwellton, East Kilbride, G74 3EH.

Signed..... Date.....