



PATIENT GUEST APPLICATION FORM

Please complete this form honestly and in full.

Laura and Jo, who run the holidays, will review all applications and may need to contact you for further information to ensure the team can meet your needs on a holiday.

To be considered for a holiday, you must:

- Be over 18
- Have had a cancer or cancer like diagnosis before the age of 30
- Be living in the UK or the Republic of Ireland
- Be able to travel independently or with the support of a companion.
- Be able to administer your own medications.
- Be able to manage your own personal care or have assistance for this from a companion who is familiar with your needs.
- If you are on active treatment or are being closely monitored by your hospital team you must discuss the suitability of a YCT holiday with them.
- If you have mobility needs and require the use of a wheelchair, you will need a companion to support you with this.

****NB we do not have access to a hoist or other manual handling equipment.**

We do not have medical assistance on site but will support transfer to the nearest hospital or GP surgery for advice if necessary during your stay.

We would ask that you do not come on holiday if you are unwell on the day of travel.

Your information is kept confidential and will only be shared amongst the Youth Cancer Trust team.

If you are eligible for a holiday based on us being able to meet your needs, Laura will make contact and offer you a date.

Please complete this document and save it. Then send as an attachment to laura@yct.org.uk

Completing this form by hand: Please print off and complete. Then post it to
**Youth Cancer Trust,
The Factory,
Advanced Health Care,
Peeverell Avenue East,
Poundbury,
Dorchester
DT1 3WE.**

Please let Laura know that you are posting it so that she can confirm receipt of it.

APPLICATION FORM

WHO'S COMPLETING THE FORM?

Young person completing themselves

Parent / Guardian

Other relative

Health professional

If not a young person, please give name and background info:

HOW WOULD A YOUTH CANCER TRUST HOLIDAY BENEFIT YOU AT THIS TIME?

WOULD YOU LIKE TO BRING A COMPANION ON HOLIDAY AND IF SO EXPLAIN WHY THIS IS IMPORTANT TO YOU?

GUEST DETAILS AND INFORMATION

PERSONAL INFORMATION

First Name

Last Name

Preferred Name

Date of Birth

Age

Gender:

Male

Female

Transgender

Non-binary / non-conforming

Prefer not to respond

Gender assigned at birth?

Male

Female

What is your pronoun preference?

CONTACT DETAILS

Street Address

Email Address

Street Address 2

City/Town

Post Code

Phone Number

EMERGENCY CONTACT

We take the wellbeing of our guests very seriously. Should we have any concerns about your health and wellbeing whilst participating in a holiday, we require you to please provide us with an emergency contact.

Name of emergency contact

Name of emergency contact

Relationship to guest

Relationship to guest

Mobile number or landline

Mobile number or landline

EQUAL OPPORTUNITIES

WHAT DO YOU CONSIDER YOUR ETHNIC BACKGROUND TO BE?

Black Carribean

Indian

Black African

Bangladeshi

Black Other

Pakistani

White Caucasian

Prefer not to say

Chinese

WHAT DO YOU CONSIDER TO BE YOUR RELIGION/FAITH?

Buddhism

Judaism

Christianity

Sikhism

Jehovah Witness

Non-religious

Hinduism

Spiritual

Islam

Prefer not to say

Jainism

*NB if you come on a holiday you may want us to know how we can support your religious practice.



COMMUNICATION NEEDS

Please let us know if you have any needs that might impact on our communication with you.

Hearing needs

Cognitive difficulties - such as memory problems or difficulty retaining information

Visual impairment

English as a second language

N/A

Speech impairment

What is the best way for Youth Cancer Trust staff to support your communication needs?

GUEST HEALTH

Information about your cancer

Cancer diagnosis

Aproximate date of diagnosis

CRIMINAL CONVICTIONS

If you tick yes, a member of staff will chat to you about it.

I do not have any criminal convictions

I have a criminal conviction

MEDICAL INFORMATION

Information about your cancer

Treatment status:

Active

In remission

Maintenance

Cured

Non-curative

****If you are on active treatment or are being closely monitored by your hospital team you must discuss the suitability of a YCT holiday with them.**

Medical contacts:

GP Name

GP Practice

GP Telephone number

Treating Hospital(s)

NHS Number

Consultant Name (if applicable)

Clinical Nurse Specialist (if applicable)

Telephone number for treatment team

OTHER CONDITIONS

ALLERGIES

YES NO

What is the allergy?

Do you carry an epipen? YES NO

How do you manage your allergy?

ASTHMA

YES NO

Do you carry an inhaler? YES NO

EPILEPSY / SEIZURES

YES NO

Carries emergency medication to manage seizures with a clear protocol

Controlled with medication

Do you know what triggers a seizure (i.e. flashing lights)?

DIABETIC

YES NO

Insulin injection

Insulin pump

Managed by diet

ADDISONS OR ADRENAL INSUFFICIENCY

YES NO

Carries hydrocortisone injection

EMERGENCY PROTOCOL

**Please ensure you bring an up-to-date protocol with you in case of an emergency for any of the above conditions.

PHYSICAL ABILITIES

Note: You must be able to manage your own personal care or have assistance for this from a companion who is familiar with your needs.

Are you able to shower without assistance?

Yes No

Are you able to use a bath without assistance?

Yes No

Can you manage steps or stairs without assistance?

Yes No

Are you bringing your own wheelchair?

Yes No

Do you use a mobility scooter when you're out and about?

Yes No

Can you swim?

Yes No

Do you have issues with mobility or dexterity?

Yes No

How can we support you with this?

Do you tire easily walking short distances?

Yes No

How can we support you with this?

MENTAL HEALTH

Do you consider yourself to have a mental health condition?

Yes

No

Please let us know how we can support your mental health needs and anything staff can be aware of to help you on your holiday.

Do you have a learning disability?

Yes

No

Do you have a neurodivergent condition?

Yes

No

Neurodivergence includes autism, Asperger's Syndrome, dyslexia, dyscalculia, dyspraxia, ADHD, obsessive-compulsive disorder (OCD) and Tourette syndrome (TS).

Please let us know how we can support you?

Fatigue levels and 'brainfog' or memory issues can be common amongst our guests. Please let us know how you manage this and how best we can support you?

MEDICATION

Please note you are responsible for managing your medication and its safe storage. There is a fridge on site for medication that needs to be kept refrigerated.

Please state any support you may need to take your medication whilst on holiday. We can not administer your medication but are happy to give reminders if this is helpful.

Please list your current medicines?

Do you need a sharps bin?

Yes

No

DIETARY REQUIREMENTS

Our chef would like to know in advance your dietary needs.

Allergy to:

Intolerance to:

Vegetarian

Pescatarian (you eat fish but not meat)

Vegan

Halal diet

Diabetic / low sugar diet

No intolerances

Alternative milk requirement?

Yes

No

Other dietary needs you would like us to be aware of (e.g. your religious practices, fasting periods)

DOGS

Laura's dog may be present during the holiday.

Please tick if you would like to discuss that this might be an issue

Yes

TRAVEL

How do you intend to travel to Dorset?

I will drive myself

My companion will drive me

I will be given a lift

By train (nearest station is Dorchester South or West)

By plane (nearest airports - Southampton, Bournemouth, Bristol or London)

By coach

PLEASE TICK ONE OF THE FOLLOWING:

I have the means to cover my own travel costs and arrange my own transport

Yes

No

I have the means to cover my own travel costs but will need help booking my transport

Yes

No

I am unable to cover my travel costs (in this instance a member of the team will be in touch to discuss how we can support you to come on a holiday)

Yes

No

Please note - we are a small charity and appreciate you being able to fund your own travel but can support if needed.

CODE OF CONDUCT

From experience we know that our guests are very respectable, considerate and courteous but to ensure clarity, we have written a code of conduct that we would like you to read and adhere to.

To ensure you have a safe and happy holiday.

YCT Staff will:

- Get to know your individual needs
- There will be a staff member available at all times should you need support. They will talk through problems and help where they can
- Staff will always be respectful, helpful and encouraging
- Staff will access medical help if required by guests
- Staff will encourage and support you to try new activities but also respect your decision if you choose not to partake in something.

YCT Staff will not:

Tolerate behaviour of anyone that impacts negatively on the group.

As a guest on holiday I agree that:

- I have given staff all relevant information in my application form about my medical needs and will update staff on any new medical issues that may arise before my holiday
- If I am still receiving treatment I have gained consent from my medical team who deem that I am well enough to attend
- I am able to self medicate and self care for any medical needs
- I will talk to staff if I have a problem or issue
- I will respect and support all the other guests and staff
- I have read and agree with the alcohol policy
- I will respect others even if I do not share their views
- I will be considerate of other guests and neighbours needs (i.e making sure you aren't too noisy at night).

I AGREE TO ADHERE TO THE CODE OF CONDUCT

YES

DECLARATION

If you are actively under the care of a hospital team or have significant conditions, we do require to discuss with you whether you are well enough to attend a residential stay. Please note that we do not provide medical care to guests but can respond to emergencies at our local hospital in Dorchester - Dorset County Hospital. We also have a local GP practice in Puddletown.

It is you the applicant's responsibility to check with your GP or health professional that you are well enough to attend a holiday. We understand that sometimes situations change and ask that if you can no longer attend your booked holiday, you please inform us asap so we can give the holiday to someone else.

****Please respond to all of the following statements with a yes or no:**

I consent to the charity using photos/videos of me on a YCT holiday for social media and marketing purposes.

Yes

No

I consent to the charity sharing any feedback or comments I provide for marketing and research purposes. (We will also confirm this with you on your arrival).

Yes

No

I consent to the charity to keep a record of this form for health and safety reasons in accordance to our GDPR policy.

Yes

No

Your information is kept confidential and will only be shared amongst the Youth Cancer Trust team.

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