The Scout Association

Registration form for entering the Duke of Edinburgh's Award

Please print clearly In CAPITALS or type details in. You must complete all the questions.

Scout District. – West Mercia

Explorer or Network Unit: 3rd walsall sea scouts

Personal details

Title·: Mr O Miss O Ms O Mrs O Other	Home Address 1·:
First name":	Home Address 2:
Middle name:	Home Address 3:
last name*:	Home Town/City·:
Email·:	Home County:
Date of Birth":	Home Postcode*:
Age:	Telephone no (home):
Gender*: Male O Female O	Telephone no (mobile):
Enrolment level·: (tick one)	Bronze O Silver O Gold O

Previous levels/sections* - please tick which sections/levels you have completed:

Bronze	O Completed award	O Volunteering	O Physical	O Skills	O Expedition
Silver	O Completed award	O Volunteering	O Physical	O Skills	O Expedition

Consent to enrol from parent or guardian (if applicant is under 18 years Old).

I agree to my son / daughter / ward doing a DofE programme. I understand that it is my responsibility to check that any activity my son / daughter / ward undertakes for their DotE is appropriately managed and insured. unless the activity is organised by the Scout Association.

Parent/guardian:	Name	Signature	/ /

I agree to enrol as a participant on a DofE programme. You will be doing your programme using our online eDofE system. This system has a set of terms and conditions that you must agree to. These are available at: www.~Dom.omlTe!:!lm.asl2x (pdf document)

Applicant	Name	Signature	/ /

Please return form with payment for £14, for Bronze/Silver or £16 for Gold. Cheque made payable to Mike Abrahams

Data supplied on this form and information about DofE activities recorded in eDofE will be used by the DofE charity, the Participants Operating Authority and DofE centre to monitor and manage DofE participation and progress. All contact from the DofE Charity using personal data will communicate useful and relevant information to either help participants complete a DofE programme. Leaders/Das to run DofE programmes more effectively or help the DofE charity improve the quality and breadth of its programmes. All contact will be via email.

For county Adviser use onl)

Registered on eDolE	/ /	Usemame
Start Date	/ /	User 10 number
Participant Fee Received	yes No	Initial Password