FLINTSHIRE YOUTH & COMMUNITY SERVICE
DUKE OF EDINBURGH'S AWARD
ENROLMENT FORM

CYNGOR Sir y Fflint Flintshire COUNTY COUNCIL

For Use of DofE Office Only
Bronze Registration £14.00, Cheque No./Cash:- _____
Silver Registration £14.00, Cheque No./Cash:- _____
Gold Registration £20.00, Cheque No./Cash:- _____

PLEASE COMPLETE IN BLOCK CAPITALS

Participant
First Name _____ Surname _____
Address
_____
_____ Postcode _____
MANDATORY e-mail:

Phone Numbers: _____
Date of Birth ____/____/____ Female / Male

I wish to participate at the following level:-
BRONZE **SILVER** **GOLD** **(circle appropriate level)**

Have you **completed** any previous levels of the D of E Award? Yes / No **(delete as necessary)**
If **Yes** please state which level - **BRONZE** **SILVER** **(circle appropriate level)**
Please give details of any medical conditions – e.g. asthma, allergies* _____
Signed by Participant _____ Date _____

If under 18 Parent's / Guardian's consent
I agree that my daughter / son / ward _____ may take part in The Duke of Edinburgh's Award.
Parent/GuardianName _____ Address _____
_____
_____ Tel: (**LANDLINE**) _____

Signed by parent/guardian _____ Date _____

Please return this form to the D of E Unit Leader.

CHEQUES TO BE MADE PAYABLE TO FLINTSHIRE COUNTY COUNCIL

To be completed by D of E Unit Leader / Youth Worker in Charge : MANDATORY
Name and Address of D of E Unit _____ Tel: _____
Unit Leader Name and Signature _____
Start Date for Award Participant _____
D of E LEADER Please return completed form to:- **Duke of Edinburgh's Award**
Glanrafon Centre
Glanrafon Road
Mold
CH7 1PA

***Use Additional sheet if required**

May 2011