



Enrolment Form for the Duke of Edinburgh's Award Hampshire County Scouts

Please print clearly

Surname _____ Forename(s) _____

Address _____

_____ Post code _____

Tel No. _____ e-mail _____

Date of birth ___/___/___ age _____ Male Female

Scout District _____ Group/Unit _____

Leader's Name _____ Explorer Scout Network Scout SSAGO

I would like to enter the Award at Bronze Silver Gold

Signature of applicant _____ date ___/___/___

Consent of parent or guardian (for young people under 18 years of age)

I agree to my son/daughter/ward participating in The Duke of Edinburgh's Award.

I have read the attached fact-sheet about the Duke of Edinburgh's Award.

Signature of Parent/Guardian _____ name _____ date ___/___/___

The following information is used to help the Award meet the needs of all young people. Only complete this section if you wish to assist in this way.

Please tick the relevant box

I would describe myself as

Asian or Asian British				Black or Black British			Chinese
Indian	Pakistani	Bangladeshi	Any other	Caribbean	African	Any other	Chinese

Mixed				White			Other (specify)
White & Black Caribbean	White & Black African	White & Asian	Any other	British	Irish	Any other	

I consider myself to have a disability* Yes No

*as defined by the Disability Discrimination Act as "a physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities".

Would you like to be added to our email list? Yes No

You will receive at most 1 email per week, which will generally not contain attachments.

This form should be accompanied by a CQ payable to Hampshire County Scout Council for £5.25 (Bronze and Silver) or £7.87 (Gold) and sent to:

SW Hampshire: Michael Baxter, 341 Woodlands Road, Woodlands, SOUTHAMPTON, SO40 7GE.

SE Hampshire: Margaret Bunyard, 34 Elsfred Road, Hill Head, FAREHAM, PO14 3NJ.

N Hampshire – please send to Mike Baxter.

For office use

Record Book Issue Date _____

UK Ref. No.