



Badge Courses 2016 Application Form

Please complete this form and return it to:

Badge Courses, Cranham Scout Centre, Cranham, Gloucestershire, GL4 8HP

Please make cheques payable to '**Gloucestershire County Scout Council**'.

One form is required for each participant.

Please write clearly.

Participant Name		
Date of birth		
Gender		
Address		
Post Code		
Telephone Number		
Email Address		
<i>Please note – communication will generally be by email.</i>		
Scout Group		
Special Needs <i>Attach extra information as required</i>		
Dietary requirements <i>Attach extra information as required</i>		
Emergency Contact Name		
Emergency Contact Tel.		
Course	Date	Cost

In signing below I promise to take a full and active part in the course that I am attending. I accept that any inappropriate behaviour may result in being asked to leave the course.

Signature (participant)

I give my permission for the above named participant to attend this badge course.

I give permission for photographs to be taken of the participant during the course for use in future promotional purposes by Cranham Scout Centre.

Signature (Participant or Parent/Carer if participant is under 18 years)

Where participants are under 18, please also provide contact details for their leader so that we can inform them of the young person's attendance of the course.

Leader Name

Email address