

# The Duke of Edinburgh's International Award Registration Form 2023-2024

Please print clearly in CAPITALS or type your details in. You must complete all the fields.

## SILVER AWARD (€380) / DIRECT SILVER AWARD (€430)

## **Personal Details:**

First Name:		Last Name:	
Form:		Student ID:	
Gender:		Ethnicity:	
Date of Birth:			
Email:			
Address:			
Postcode:	City:		Mobile:

### Emergency contact details:

	Emergency Contact 1	Emergency Contact 2
Contact Name:		
Relationship to you:		
Telephone number(s):		

#### Declaration:

I agree to register as a participant on the Award programme. I understand that the scheme is a voluntary activity that presents a series of challenges to participants. I accept that it is my responsibility to follow the instructions of the DofE team of teachers and of other people in charge of the relevant activities.

I have read and I agree with the information, procedures and regulations outlined on the Award Centre's website. By registering, I agree to abide by all rules of behaviour and the school's Code of Conduct, which are available on the school website.

Finally, I understand that I will be managing my programme using the Online Record Book (ORB). I acknowledge that this system has a set of terms and conditions I agree to. These terms and conditions are available at www.intaward.org.

Print Name	Signature	Date

#### Consent to register from parent or guardian:

I agree to my son/daughter taking part in the Award programme. I have read and I agree with the information, procedures and regulations outlined on the Award Centre's website. By consenting to my child registering, I agree to abide by all rules of behaviour and the school's Code of Conduct, which are available on the school website.

I undertake to provide the school with a medical certificate proving that my child is fit to participate in the programme. I understand that the Adventurous Journey Section of the Award is inherently risky since it involves unescorted travel of the participants in unknown and remote wilderness areas.

Mobile:	Email:	Email:	
Print Name	Signature	Date	