



DofE Participant Enrolment Form

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

DofE Centre: SWGS	DofE group: South Wilts Grammar School
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DofE level:

Bronze <input type="checkbox"/> Silver <input type="checkbox"/> Gold <input type="checkbox"/>
Have you registered for any previous levels of the DofE? No <input type="checkbox"/> Yes <input type="checkbox"/>
If YES – please give the name of the DofE Centre, you were registered at: eDofE ID number (if known):

With effect 1st April 2018: Enrolment Fee: Bronze or Silver Award £21.00 Gold Award 28.00

In addition to the above enrolment fee there is an additional admin charge of £11.50 per enrolment. Payment is via ParentPay. Please login via the school website where you can order and pay. If you have any difficulties, please contact the Finance Office by emailing finance@swgs.wilts.sch.uk or telephone 01722 343750

Personal details:

First name:	Last name:
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth: / /
Primary language English <input type="checkbox"/> Welsh <input type="checkbox"/> Other <input type="checkbox"/>	
Date you wish to start your DofE programme if known (enrolment date): / /	

When you first sign in to eDofE you will be asked to record some personal details such as your contact details, ethnicity and personal circumstances along with details of any medical needs you may have. This data is used to enable your Leaders to support you doing your DofE programme and for the DofE's statistical and reporting purposes. You will always have a 'prefer not to say' option.

Participant's Contact details:

Email address:	
Address (line1):	
Address (line 2):	
Town/City:	
County:	Postcode:
Telephone:	Participant's Mobile number:

Parent/Guardian Emergency contact details:

Emergency Contact name:	Relationship to you:
Emergency contact telephone number(s):	



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Declaration:

I agree to enrol as a participant on a DofE programme. I understand that I will be managing my programme using the online eDofE system. I acknowledge that this system has a set of terms and conditions that I agree to. These terms and conditions are available at www.edofe.org

Print Name (Participant)	Signature	Date
		/ /

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

I agree to my daughter / ward doing a DofE programme. I note that it is my responsibility to check that any activity my daughter / ward undertakes for their DofE programme is appropriately managed and insured, unless the activity is directly managed or organised by their Licensed Organisation.

Print Name (Parent/Guardian)	Signature	Date
		/ /

PLEASE HAND THIS ENROLMENT FORM TO YOUR DofE MANAGER (Sandra Morris) or post in the D of E box outside the finance office at SWGS

PLEASE ENSURE THAT A COMPLETED MEDICAL/CONSENT FORM IS ATTACHED TO THIS ENROLMENT FORM (This can be found on the SWGS Website in the D of E area)

Note:

Data supplied on this form and in eDofE and information about DofE activities recorded in eDofE will be used by the DofE Charity, the Licensed Organisation and DofE centre to monitor and manage DofE participation and progress by young people and manage and support Leaders.

The DofE Charity will use personal data to communicate useful and relevant information to either help participants complete a DofE programme, Leaders/LOs to run DofE programmes more effectively or help the DofE Charity to improve the quality and breadth of its programmes.

Occasionally the DofE Charity may send you information relating to commercial offers. If you do not wish to receive commercial information from the DofE Charity you can choose not to by amending your contact preferences in your eDofE profile at any time.