



## DofE Participant Enrolment Form

**Information needed for the Sign-Up Process on Wednesday 24 January**

**Please print clearly in CAPITALS. You must complete all of the questions.**

**DofE level:** Silver

**Personal details:**

First name:		Last name:	
Tutor Group:	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth:     /     /	
Student email address(es):			
Parent email address(es):			

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.

**Your DofE Programme:**

Please complete the following (e.g. helping at charity shop, football, playing the piano, etc.):

You need to do at least 6 months Volunteering and a minimum of 6 months on either Physical or Skills and 3 months on the other. It's up to you which one you do for longer.

3 months    6 months

Volunteering: .....	<input type="checkbox"/>	<input type="checkbox"/>
Physical: .....	<input type="checkbox"/>	<input type="checkbox"/>
Skill: .....	<input type="checkbox"/>	<input type="checkbox"/>



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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](http://www.eDofE.org). I also recognise that climbing, hill walking and mountaineering are activities with a danger of personal injury or death. Participants in these activities should be aware of and accept these risks and be responsible for their own actions and involvement."

Print Name	Signature	Date
		/ /

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

I agree to my son / daughter / ward doing a DofE programme. I note that it is my responsibility to check that any activity my son / daughter / ward undertakes for their DofE programme is appropriately managed and insured, unless the activity is directly managed or organised by their DofE group, centre or Licensed Organisation. I also recognise that climbing, hill walking and mountaineering are activities with a danger of personal injury or death. Participants in these activities should be aware of and accept these risks and be responsible for their own actions and involvement."

Print Name	Signature	Date
		/ /

### 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.

### For Licensed Organisation/Centre administration only:

Date registered onto eDofE	/ /
Expected start date	/ /
Participant Fee received	Yes <input type="checkbox"/> No <input type="checkbox"/>
Username	
User ID number	