

**Enrolment form**

Please write all details clearly in block capitals

I wish to enrol for the **Duke of Edinburgh's Award (DofE)** at the **Bronze ~~Silver Gold~~** ~~level~~ (please tick one)

# First name Surname

Email address (**COMPULSORY**)

# Date of birth

(DD/MM/YYYY)

# Gender (please tick)

Male

Female

(Silver/Gold only) I already have an eDofE account and my ID number is

DofE leader’s name: **Ollie Naylor**

Group name (Youth Centre where you are doing your DofE): Enter Name Here: **Park Lane School**

Signature of applicant Date

Please note: by filling in this form you have given your consent for this information to be collected, processed and held on a secure database by Achieving for Children (AFC), for the purpose of maintaining and improving the level of service given to young people. Data supplied on this form and information about DofE activities recorded in eDofE will be used by The DofE (the charity), AFC and the DofE centre (i.e. the school / centre where they applied) to monitor and manage DofE participation and progress. All contact from the DofE Charity using personal data will communicate useful and relevant information to either help participants complete a DofE programme, help leaders or operating authoritys to run DofE programmes more effectively or help the DofE Charity improve the quality and breadth of its programmes. All contact will be through the eDofE messaging system or opted in via email. Participants can choose to receive this information to an external email account or by post using the *personal preferences* section in eDofE. These preferences can be updated at any time.

**Please note:** All DofE participation is recorded online. You will be emailed a username and password and you should record your progress on [**www.edofe.org**](http://www.edofe.org/)

## Parent or guardian's consent for those under 18 years

### I accept the conditions of the Duke of Edinburgh's Award and of Achieving for Children as my operating authority and agree that my son or daughter, named above, can take part. I understand that where a participant makes independent arrangements for undertaking activities as part of their DofE programme, it is my responsibility as parent or guardian to ensure the suitability of the provider.

Signed (Parent/Guardian)

Print name (Parent/Guardian) Date

## Graphical user interface Description automatically generated with medium confidenceDofE-Logo