GIRLGUIDING LONDON AND SOUTH EAST ENGLAND REGION
DUKE OF EDINBURGH'S AWARD – SERVICE REGISTRATION FORM

NAME	
ADDRESS	POST CODE
TEL	
EMAIL	
DATE OF BIRTH	
CURRENT MEMBER OF GUIDE ASSOCIATION?	YES/NO – IF YES, GIVE UNIT AND DIVISION
EX MEMBER OF GUIDE ASSOCIATION?	YES/NO – IF YES, GIVE UNIT, DIVISION AND DATE LEFT
SCHOOL OR OTHER OPERATING AUTHORITY (if not registered for D of E through Guiding)	NAME CONTACT PERSON TEL
LEVEL OF AWARD	BRONZE/SILVER/GOLD
SERVICE OFFERED	
MINIMUM SERVICE PERIOD	
DATE WR FORM SUBMITTED (if young person is 16 or over)	WHO SUBMITTED TO
DATE TO START SERVICE	MUST BE AFTER WR FORM CLEARED
UNIT WHERE SERVICE TO BE PROVIDED	UNIT DIVISION GUIDER'S NAME ADDRESS POST CODE TEL EMAIL
MENTOR	NAME TEL

When completed, <u>immediately</u> send this form to your County Duke of Edinburgh's Award Adviser (see County Address Book for details)

02/03