**Application form for Discover Scuba Diving 2021/2022**

**All participants must be able to swim 50m in clothing and keep afloat for 5 minutes - Rule 9.42(a)**

The details requested on this form are to enable contact with the young person and parents / carers regarding arrangements for the event and for suitable sizing of equipment loaned. It will also be held electronically in encrypted form and some details transferred to the dive school. This form will be destroyed within 7 days of the completion of the event.

|  |  |
| --- | --- |
| To: Derek Newman 34 James Grieve Road Abbeymead Gloucester GL4 5GZ |  |
| \*Participant Full Name: | Cost: £29 |
| Known As: | \*Male/Female |
| \*Address: | \*Date of birth: |
|  | \*Group/Unit: |
|  | \*\*Landline Tel No: |
| \*Post Code: | \*\*Mum’s Mobile Tel No: |
| Parent / Carer email: | \*\*Dad’s Mobile Tel No: |
|  |

\* indicates mandatory fields \*\* at least one phone number (landline or mobile) to be supplied

|  |  |
| --- | --- |
| Measurements to assist the dive school for equipment sizing etc | |
|  | |
| Height (inches): | Waist (inches): |
| Chest (inches): | Hip (inches): |
|  | Inside Leg (inches): |
| Shoe Size (UK): |  |

***Further forms requiring medical details will be sent for you to return before the event.***

I wish to attend this course and have paid the correct fee of £29 by (please delete as appropriate):

**Preferred:** BACS - CAF Bank 40-52-40. Account No 00021064. Reference is SCUDSD *Surname Initial*

**OR** cheque (enclosed with this form) payable to Cheltenham District Scout Council

Signature of applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of parent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Leader's Declaration:** I have discussed the requirements of the course and am satisfied that this Scout/Explorer is capable of completing it successfully.

Signature of Leader: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_