



DUMFRIES AND GALLOWAY COUNCIL



Participant Enrolment Form

You must complete all of the questions.

DofE Centre and group details (if you know them):

| |
|--------------|
| DofE Centre: |
|--------------|

DofE level:

| |
|---|
| |
| 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) : |

Personal details:

| | | |
|---|------------------|------|
| First name: | Last name: | |
| Gender: | Date of Birth: | Age: |
| Primary language: | School Attended: | |
| Participant email address: | | |
| 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.

Contacting you:

| | | |
|--|---------------------------------|--|
| How would you prefer to be contacted: (please tick) | Phone <input type="checkbox"/> | Letter <input type="checkbox"/> |
| | E-mail <input type="checkbox"/> | Text <input type="checkbox"/> |
| Social Media details: | | |
| Mobile number: | | |
| May Dumfries & Galloway Council & the DofE use (and transfer without alteration) your child's image on photograph or video for promotional purposes. e.g. newsletter, website article? | | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Consent to enrol from parent or guardian (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 acknowledge that the online programme recording system, eDofE, has a set of terms and conditions that my son / daughter / ward agrees to. These terms and conditions are available at www.eDofE.org

| Name | Parent/guardian email address | Date |
|---------------------------------------|-------------------------------|------|
| | | |
| Signature (once form fully complete): | | |

For Centre use only

| | |
|--------------------|--|
| Paid | |
| eDofE Registration | |

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.

We also send emails that contain information about the Charity, DofE negotiated privileged discounts and invites to events and other activities however if you would like to receive these emails you will need to opt in. Once you have opted-in to this you can opt out at any time by visiting www.dofe.org/preferences, or clicking the unsubscribe link that can be found at the bottom of all non-programme related email.

Any images taken by the DofE Charity, the Licensed Organisation and DofE centre will be used in compliance with Data Protection guidelines.