



LE Training 2017.18 Booking Form

Please complete this form and return to n:flame, Trinity at Bowes Centre, Palmerston Road, London N22 8RA Please notify us if your medical details or personal circumstances change.

1. Your details (Please use block capitals.)

First Name:

Surname:

Address:

Town:

City/County:

Post Code:

Date of Birth:

Church/group:

Mobile No:

Email:

2. Emergency Contact Details

(Someone not on LE Training who can be contacted at anytime in case of an emergency.)

Their name:

Relationship to you:

Their Mobile No:

Alternative Phone No:

3. My Testimony

Please let us know how and when you became a Christian

4. Medical Details and Dietary Requirements or Allergies

(This should include any medical conditions, any special needs, and any current medication.)

5. Youth Leaders or Church Leaders recommendation

In my opinion the young person (named above) would be both suitable and would benefit from participating in the LE Training course.

Name:

Email: Phone

Signature Date

6. Applicant Declaration (If 18 years or older.)

I (the above named person) understand that I am taking part in this project at my own risk and that The n:flame Trust is not liable for any accident or loss.

Signature Date

7. Parental Declaration

(To be completed by a parent/guardian of the above named if they are under 18 years of age.)

As parent/guardian of the above named person I give my permission for them to participate in LE Training and understand that they are involved at their own risk and that both the organisers of LE Training and The n:flame Trust are not liable for any accident or loss that might happen to them.

I also give permission for n:flame to take photos and video of my child for advertising purposes. (please tick)

I give permission for an adult to give my child paracetamol if needed, I also give permission for an n:flame team member to act on my behalf if my child should need any medical treatment, including dental treatment, if I cannot be contacted. (please tick)

Parent/Guardian's Name:

Signature Date

8. Payment

You can pay in several ways - please select one option from the list below:

- My Church are sponsoring me. Please contact my leader to arrange payment.
- I will be paying the full £95 in advance.
- I will be paying £30 deposit now and the remainder before the Weekend Away.

(Cheques payable to 'n:flame'. BACS details available upon request.)