

Girlguiding Hertfordshire Young Leader Registration Form



First Name: _____ Last Name: _____

GGUK Membership No: _____ Date of Birth: _____

Address: _____

Postcode: _____ Email: _____

Home Phone: _____ Mobile: _____

Your Guiding Experience: Rainbow / Brownie / Guide (delete where necessary)

Do you wish to work on the Young Leader Qualification? YES / NO

Are you involved with the Duke Of Edinburgh's Scheme? YES / NO

Are you involved with the Queen's Guide Award? YES / NO

I would like to be a Young Leader and have discussed leadership options with my Young Leader Guider.

By signing this form I agree to the details recorded here being held in a database by a person appointed as a Records Officer by The Guide Association. This information will be held in confidence within The Guide Association.

Signature of Young Leader _____ Date _____

Signature of Parent or Guardian _____

Signature of Young Leader Guider, District Commissioner or District Recruiter (*delete where necessary*)

_____ GGUK Membership Number _____

REGISTRATION PROCESS

- The Young Leader role must be entered on Go! by the local district commissioner or district key user before sending the form to Lucy Davies
- Choose the correct role for the Young Leader - Young Leader 14-16 or Young Leader 16-18 or Young Leader-LQ
- Check that the Individual Type is set to Volunteer

Please send form to:

Lucy Davies
Girlguiding St Albans Senior Section Adviser
26 Marten Gate
St Albans AL4 9NB