

QUEEN'S GUIDE RESIDENTIAL APPLICATION FORM

Please complete this form and email to Learning@girlguidingnz.org.nz or fax to the National Office 03 366 8413, or by mail to the National Office, PO Box 13 143, Christchurch)



WORKSHOP DETAILS

Title: Queen's Guide Residential
 Venue: _____ Dates: From _____ To _____

YOUR DETAILS

Surname _____ First name _____
 Address _____

 ID Number _____ Age _____ D.O.B. _____
 Home Phone # _____ Cell Phone # _____
 Email address _____
 Zone _____ Region _____ District _____
 Guiding Position _____

Details of any special needs/requests/reasons for not being able to participate fully (diet, health, other)

If you have a special need (other than a dietary requirement) please indicate this. If you require a support person to attend the workshop with you please make arrangements for this at your cost (or your district/unit cost).

You will receive an acceptance letter after the closing date. Please contact the Learning and Development Administrator if you have not received this letter 10 days after the closing date. *Please enclose a stamped self-addressed envelope if you do not have an email address that we can electronically send the acceptance letter to.

TRAVEL (please do not make travel bookings until you have received an acceptance letter from the National Office)

- I would like the Learning and Development Administrator to book my flights and I attach a Travel Bookings Request form (ATC2/11)
- I wish to book my own flights - please contact the Learning and Development Administrator prior to booking. They will advise suitable arrival and departure times for this workshop
- I will be travelling by car
- I will be travelling by bus

Please charge my REGION or DISTRICT for the workshop fee. Region/District name: _____
 (Please do not send payment with your application).

The pre-requisite for attendance at the residential is that the applicant has achieved her Peak Award and is aged 16 ½ at the time of the residential. Ranger Leader to complete section below *(This section must be completed before forwarding application form to the National Office)*

Ranger Leader name _____ (please print) I confirm that _____ (applicant) has achieved the requirements to attend this Queen's Guide Residential.

Ranger Leader signature _____ Member ID#: _____