



**The Boys' Brigade  
Northern Ireland Headquarters**

Newport, 117 Culcavy Road, Hillsborough, Co. Down, BT26 6HH  
Tel: 028 926 88 444 Email: [nitraining@boys-brigade.org.uk](mailto:nitraining@boys-brigade.org.uk)

## **.Queen's Badge Residential Courses 2017-2018**

Cost	£75.00 Payment can be made by cheque or card. <i>(NB: card processing fee applies)</i>
Venue	Provisionally - Humphrey's at Rathmore, Larne
Dates	9–11 February 2018 23-25 February 2018 9-11 March 2018 20-22 April 2018 22–24 June 2018 (Joint Skills/Residential)
Notes	Maximum of 5 candidates per Company per course  You must participate fully in a Completion Residential: (a) no earlier than the session equivalent to Year 13; (b) not less than 12 months from the date of registration; and (c) not less than 6 months from the completion of Skills for Queen's Badge training.  Registrations will only be accepted by receipt of completed record book, registration form, consent form and payment. Extra Forms may be photocopied. If 1st choice course is fully booked at time registration is received captain will be notified that they have been allocated their 2nd choice course.
Refund Policy	Withdrawal, including transfer to another course: <ul style="list-style-type: none"><li>• less than 8 days prior to commencement of a course will result in the loss of 100% of the course fee;</li><li>• 8-14 days prior to commencement of a course will result in the loss of 75% of the course fee;</li><li>• 15-28 days prior to commencement of a course will result in the loss of 50% of the course fee.</li></ul>
	<i>For full Terms and Conditions see <a href="http://www.bbni.org.uk/niforms.htm">http://www.bbni.org.uk/niforms.htm</a></i>
Payment Options	<b>Cheque</b> Please make cheque payable to 'Boys' Brigade NI District' and post with completed forms to the address above. <b>Or</b> <b>Card</b> (online using PayPal – you don't need an account to use this service.) Use this link <a href="http://www.paypal.com/uk/webapps/mpp/send-money-online">www.paypal.com/uk/webapps/mpp/send-money-online</a> Enter the amount (including charges) to be paid and the following email address to send payments to: <a href="mailto:newport@boys-brigade.org.uk">newport@boys-brigade.org.uk</a> In the notes section please type your company name and what the payment is for. Then post these forms to the address above.
Data protection	The Boys' Brigade is registered under the Data Protection Acts. Any parent may request a copy of relevant information held by the Company/ Battalion/District and enquiries should be directed to Brigade Headquarters.



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## Queen's Badge Residential Courses 2017-2018 Registration Form

Course Applied for:	1st Choice:	2nd Choice:	
Candidate Name:	Name you want printed on Boy's QB certificate:		
	Known as:		
Date of Birth (dd/mm/yyyy)			
Company			
Candidate's Address (Incl. Postcode)			
Candidate's Telephone	Landline		
	Mobile		
Candidate's Email Address			
Date of Registration for Queen's Badge (stamped in Record Book)			
Date Skills for Queen's Badge course completed (must be at least 6 months before Queen's Badge Residential)			
<b>Payment:</b>			<b>75.00</b>
<i>If paying via PayPal please add £1.50 (PayPal processing fee)</i>			
Grand Total			
Tick payment method selected:	PayPal* <input type="checkbox"/>	Cheque <input type="checkbox"/>	
*See notes on page 1.			

Signed: \_\_\_\_\_ Daytime Tel. No: \_\_\_\_\_  
                    Company Captain

Captain's email: \_\_\_\_\_

**Please send this registration form along with the following documents to:**  
Newport, 117 Culcavy Road, Hillsborough, Co. Down, BT26 6HH

- Consent Form
- Completed QB Record Book
- Course Fee - Cheque enclosed [ ] OR PayPal used [ ]

FOR NIHQ USE:                      Date received \_\_\_\_\_                      Receipt Number \_\_\_\_\_

Consent form received                      [ ]                      photo in book                      [ ]

6 months since S4QB                      [ ]                      book signed by QBA                      [ ]



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## Consent Form

### PART A (To be completed by Company Captain/Official)

Company/Battalion/District: Northern Ireland District  
Activity or Event: Queen's Badge Residential  
Venue: Humphrey's at Rathmore, Larne BT40 1DZ  
Dates: \_\_\_\_\_  
Officer in Charge: N.I.D. Training & Programme Officer **Tel No:** 028 9268 8444 (Mon-Fri)  
Number during the weekend: 028 2827 3263. *It is advised that parents/  
guardians make a note of the above details.*

### PART B (To be completed by the Parent/Guardian)

Full name of member: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Email Address\*: \_\_\_\_\_

*\*May be used for course correspondence and to inform boys of other BB opportunities they may be interested in. If you prefer us not to contact your son by email please do not fill in this part.*

### MEDICAL DETAILS

Name of young person's Doctor: \_\_\_\_\_

Doctor's address: \_\_\_\_\_

Doctor's Tel No: \_\_\_\_\_

National Health Service Number: \_\_\_\_\_

Details of medicine/diet/ treatment  
being taken/followed (including any  
medication needed during event/  
activity): \_\_\_\_\_

Details of known allergies/ sensitivities  
(e.g. penicillin): \_\_\_\_\_

Has the young person been immunised against tetanus within the last 5 years. Yes  No

### PARENT/GUARDIAN CONTACT DETAILS (for use during the event/activity)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_

Mobile: \_\_\_\_\_

### Alternative Contact:

Name: \_\_\_\_\_

Tel No: \_\_\_\_\_

### PERMISSION

I give my permission for \_\_\_\_\_ (young person's name) to attend and take part in activities which may include sporting activities, drill, Church parade or visit to local leisure centre. In the event of illness or accident, having parental responsibility for the above named child, I give permission for first aid to be administered where considered necessary by a first aider, if available, or medical treatment to be administered by a suitably qualified medical practitioner.

During the time your child will spend with us, photographs/video may be taken and used for PR to include print media, BB publications and social media and for this we need your permission. On signing this form we will assume you have given permission for your child's image to be taken unless otherwise informed.

Parent/ Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_