



**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

Queen's Badge Residential Courses 2017-2018

Cost	£77.50 Payment can be made by cheque or card.
Dates & venues	9–11 February 2018 @ Humphrey's at Rathmore, Larne 23-25 February 2018 @ Humphrey's at Rathmore, Larne 9-11 March 2018 @Humphrey's at Rathmore, Larne 20-22 April 2018 @ BB NIHQ, Newport 22–24 June 2018 (Joint Skills/Residential) @ BB NIHQ, Newport
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. Confirmation of places booked will be sent by email only – to the Captain if an address is supplied
Refund Policy	Withdrawal, including transfer to another course: <ul style="list-style-type: none">• less than 8 days prior to commencement of a course will result in the loss of 100% of the course fee;• 8-14 days prior to commencement of a course will result in the loss of 75% of the course fee;• 15-28 days prior to commencement of a course will result in the loss of 50% of the course fee. <i>For full Terms and Conditions see http://www.bbni.org.uk/niforms.htm</i>
Payment Options	Cheques: payable to Boys' Brigade NI District. Card: We can take card payments on the phone (028 9268 8444) or online using this link: www.paypal.com/uk/webapps/mpp/send-money-online ① Type in newport@boys-brigade.org.uk as the address to send payment to. ② Enter total amount due and in the notes please type your company name and what payment is for ③ Follow on screen instructions to enter your card details. Don't forget to post or scan and email your entry form to nihq@boys-brigade.org.uk
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:		
	Name 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 <i>(must be at least 6 months before Queen's Badge Residential)</i>			
Payment:			£77.50

Tick payment method selected: Card Cheque

**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
- Cheque (if applicable)

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: _____
Dates: _____
Officer in Charge: NID Training & Programme Officer **Tel:** 028 9268 8444 (Mon-Fri, 9am-5pm)
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: _____