



DISCOVERY 2012 C ALMA BAKER TRUST TRAVEL AWARD

If you are filling in this form by hand please use **BLACK INK**.

SURNAME:		FIRST NAMES:	
AGE:		DATE OF BIRTH: / /	
COUNTY:		MEMBERSHIP NO:	
HOME ADDRESS:			
POST CODE:			
HOME TELEPHONE NO:		MOBILE TELEPHONE NO:	
EMAIL ADDRESS:			
CLUB/COUNTY:		MEMBERSHIP NO:	
PASSPORT NO & EXPIRY DATE:			
COUNTRIES PREVIOUSLY VISITED:		LANGUAGES SPOKEN:	
FAMILY HOLIDAYS:			
WITH YFC:			
OTHER:			
PRESENT OCCUPATION, EDUCATION & TRAINING:			
CLUB ACTIVITIES:		OFFICES HELD WITHIN YFC:	
ACTIVITIES BEYOND CLUB LEVEL:		INTERESTS / HOBBIES OUTSIDE YFC:	

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*DESCRIPTION OF EMPLOYERS FARM / ENTERPRISE
PLEASE GIVE DETAILS OF PRESENT AND PREVIOUS RESPONSIBILITIES:*

<p>NAME & ADDRESS OF 2 REFEREES:</p> <p>1.</p>	<p>2.</p>
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STARTING DATES PREFERRED - PLEASE TICK AT LEAST 2 DATES

APRIL	JULY	OCTOBER	JANUARY
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Please declare below:-

Any allergies/medical conditions, which may affect your health

Any specific dietary requirements

Any driving offences that you have been charged with

PERSONAL STATEMENT

Please print clearly or type on a separate sheet and attach to your application.
Your statement should be at least 100 words and should include the following:

- Reasons for choosing the Alma Baker Trip to New Zealand.
- Expectations from the trip. Hopes and plans for your future.

On completing this application form, please sign it to confirm that all the information given is a true and correct record. Next send it to your County Office for recommendation that you are suitable to represent NFYFC on the International Discovery Programme.

County Office - please sign below and return to:

Discovery Officer c/o Discovery Programme c/o NFYFC, YFC Centre, 10th Street, Stoneleigh Park, Warks, CV8 2LG
t: 00 44 (0) 2476 857 200 e: discovery@nfyfc.org.uk

This form must reach the Discovery Office by 14 November 2010

Signed by member.....

Signed by county office.....

Date:.....

Name of and Position of County Officer:

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Date.....