

WOODLAND PROGRAM REGISTRATION FORM

Which Course(s) are you registering for?

- | | |
|-------------------------------------|---------------------------------------|
| Woodland Rescue (D&A Recovery) | Woodland Minds (Mental Health) |
| Woodland Repay (Ex Offenders) | Woodland Active (Adult SEN) |
| Young Futures (Young People - NEET) | Green Days (Girls only Mental Health) |
| Woodland Tracks (Veterans) | Green Care (SEN / Mental Health) |
| Inclusive Conservation (SEN Youth) | Green Fingers (Mental Health) |
| GreenWood Training (Retirees) | Other |

Full Name

First Name

Last Name

Address

Street Address

Address Line 2

County

Postcode

E-mail

Contact Number

Location

- | | |
|--------------------------------|------------------------------|
| Frithy Wood, Lawshall | Castan Wood, Martlesham |
| RSPB Minsmere | Scarlett Wood, Nr Colchester |
| Mutford Big Wood, Nr Lowestoft | Museum of East Anglian Life |
| Other | |

Registration Information

Self Referred Yes
 No

Referrer Name, Organisation, Telephone number & email address if applicable

Emergency Contact Name & Telephone number(s)

Dr's Name & Telephone number (in case of emergencies)

Medication Requirements

Dietary Requirements

Please specify

- Vegetarian Meals
- Non-Vegetarian Meals
- Allergies
- Other

Do you have any confidential disclosures you wish to make? Yes
 No

If applicable please give Name and Telephone number of your Probation Officer

Previous Attendee

Please check the box to indicate if you have attended a previous GLT course

How did you hear about this course?

Photo Permission - please tick if you give permission for photo's/videos to be used for
Project Assessment or evidence of achievement
GLT Publicity (eg brochures, press releases, displays)
GLT Website
FLT Social Media Sites (Facebook, Twitter, Instagram)

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Charity Registration Number 1000977 Company registration Number: 02550866

FOR INTERNAL USE ONLY

Please tick if participant completed the course

Please tick if participant DID NOT attend