



ICE 2020 (International Community Experience) Participant Application Form

Girlguiding Midlands, 21 Lower Church Street, Ashby de la Zouch, LEICS, LE65 1AB

This "Participant Application Form" should be completed along with the "Payment Plan Agreement", the "Information & Consent Form" and the "Health Information Form". All four forms, completed & signed, should be sent to the address above before 31 May 2019.

This form should be completed by the Guide applicant, not by her parents/carers. Thanks.

PERSONAL DETAILS			
Guiding Membership No.		Preferred Name	
Given Name(s)		Family Name	
Address			
Postcode		Date of Birth	

GIRLGUIDING RESUME			
Your Current Unit Name			
Guide Leader's Name			
Guide Leader's Membership number			
Your District Name			
Your Division Name			
Your Guiding County			
How many years have you spent as a	Rainbow: years	Brownie: years	Guide: years

RESIDENTIAL EXPERIENCE

How many nights have you spent away from home (without parents or family)?

With Guiding?	<i>Indoors</i>	nights	Where did you go?
	<i>In a tent</i>	nights	
With School?	<i>Indoors</i>	nights	Where did you go?
	<i>In a tent</i>	nights	
With Another Group?	<i>Indoors</i>	nights	Where did you go?
	<i>In a tent</i>	nights	

OUTDOOR & ADVENTUROUS ACTIVITIES

What outdoor or adventurous activities have you taken part in previously?

(e.g. climbing, hiking, canoeing, abseiling)
When and where did you do this?

TRAVEL & INTERNATIONAL EXPERIENCE

Which Countries or Regions have you visited?

How long was your trip?

What did you do whilst you were there?

Name

Membership Number

TELL US MORE ABOUT YOU	
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What are your hobbies and interests outside of Guiding?	
Do you have any interesting or unusual skills or abilities?	
Are you involved in any local community activities or groups?	
Have you been involved in any service projects before?	
Who else lives with you or is in your immediate family unit?	

WHY IS ICE THE RIGHT ADVENTURE FOR YOU?	
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Why have you applied to be part of ICE 2020?	
What about the ICE programme most excites you?	
What about the ICE programme worries you?	
What question(s) would you like to ask about ICE?	

YOUR COMMITMENT			
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<ul style="list-style-type: none"> I confirm that everything written above is my own opinion and a good reflection of my experience. I understand that by applying to be part of ICE 2020 I am committing to participate in the Kick Off event and all three Residential events. I understand that there will be activities and challenges for me to complete in between the residential events and I agree to support and participate in these. 			
Signed		Date	
Name		Membership Number	