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| Sixth Year Outdoor Learning ChallengeWednesday 29th March 2016**TEAM REGISTRATION FORM** |
|  |
| **School** |  | **School Tel. No.** |  |
| **Member(s) of staff accompanying the group on the day** |  |
| **Contact Details** | **Phone:** |  | **email** |  |
| **2nd Adult Helper (optional)** |  |
| **Team Member 1**  | **M (✔)** |  | **F (✔)** |  | **Name** |  |
| **Team Member 2** | **M (✔)** |  | **F (✔)** |  | **Name** |  |
| **Team Member 3** | **M (✔)** |  | **F (✔)** |  | **Name** |  |
| **Team Member 4** | **M (✔)** |  | **F (✔)** |  | **Name** |  |
| **Team Member 5** | **M (✔)** |  | **F (✔)** |  | **Name** |  |
| **Team Member 6** | **M (✔)** |  | **F (✔)** |  | **Name** |  |
| **Reserve 1** | **M (✔)** |  | **F (✔)** |  | **Name** |  |
| **Reserve 2** | **M (✔)** |  | **F (✔)** |  | **Name** |  |

Please return to: outdoorlearning@midlothian.gov.uk

Midlothian Outdoor Learning Service

C/O Peniciuk High School

39a Carlops Road

EH26 9EP

TEL: 01968 664043