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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](mailto:outdoorlearning@midlothian.gov.uk)

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