



high sports

YOUNGSTERS in the MOUNTAINS

Award application form

Treated in the strictest confidence

Full name: _____

Address: _____

Postcode: _____

Tel Nos. Home: _____ Mobile: _____

Email address (if applicable): _____

Age: _____ Date of birth: _____

School/college or employer: _____

ALL SECTIONS MUST BE COMPLETED

PLEASE USE THE REVERSE OF THIS FORM IF YOU REQUIRE MORE SPACE PER SECTION

SECTION 1 - *A brief description of your personal experience in mountain sports or outdoor pursuits:*

SECTION 2 - *Your proposal for an award :*

SECTION 3 - *Recommendation to be completed by Teacher, Employer, Club chairman or Youth group leader:*

Teacher/Employer/Club chairman/Youth group leader (please highlight which) SIGNATURE:

Please refer to the Award Conditions before completing and submitting this form to:-

STUART CATHCART, HIGH SPORTS, 51/52 WYLE COP, SHREWSBURY, SY1 1XJ.