

Art of Mentoring Registration Form

Dates: 4th-10th July 2010

Name _____ Date of Birth ____/____/____

Nickname _____ Gender Male Female

Age on first day of program _____

Address: _____

City _____ Post code _____

Home phone () _____

E-mail (write clearly please!) _____

I have read your children's policy and wish to bring a child.

Names & ages of children:

If child is 6 years or under, what is the name of the person accompanying you to care for them during the day?

or I wish to accompany another participant as a child carer. The name of the participant is _____, the name and age of the child/ren are: _____

Please fill out a medical form for any children and sign it on their behalf.

Tell us a bit about yourself ☺

These questions are designed to better accommodate your needs during this week.

What other associated or relevant courses have you attended?

What is your “occupation”? Or how do you spend most of your time?

Why are you interested in this program?

How do you plan on using this course in your life? Job? Family? Friends? Students?

What interests you most about nature? i.e. tracking, birds, plants, etc.?

Do you have a 'sit spot'; a place that you go to frequently and sit at? If so, what type of ecosystem is it?