

India Residential Application Form



Registered Charity No: 1128463

Please complete this form, or ask someone to help you, and send it to the address at the end of this form

Name: _____ Date of Birth _____
Address: _____
_____ Post Code _____

Using the space provided, please write why you would like the opportunity to take part on a Residential to India.

Please Turn Over

Please return completed application forms to:
Timeout Foundation · Unit 2 Ripponden Mill · Ripponden · HX6 4DH

Using the space provided, please write a short plan on how you would raise £50.00 for a project with Young People in India.

Medical Questionnaire

Please list any medical conditions you currently or previously had. Please include any time in hospital.

Please list all immunisations you have been given

Immunisation

Date

Is there anything else you would like to add to your application?

Thank You.

Please return completed application forms to:
Timeout Foundation · Unit 2 Ripponden Mill · Ripponden · HX6 4DH