CANOLFAN STOREY ARMS

FFURFLEN GAIS

|  |  |
| --- | --- |
| **Dyddiadau cwrs**  | **Dydd Llun 19 tan ddydd Gwener 23 Awst 2019** |
| **Enw** |  | **Rhyw** |  |
| **Cyfeiriad** |  |
|  |
|  | **Cod post**  |  |
| **Ffôn** | **Cartref** |  | **Symudol** |  |
| **E-bost** |  |
| **Dyddiad Geni**  |  | **Oed (ar ddechrau cwrs)** |  |
| **Enw’ch Uned/Grŵp Dug Caeredin** |  | **Cyfeirnod Cyfranogwr Dug Caeredin** |  |
| **Allwch chi nofio?** |  | **Os gallwch, a allwch ... (rhowch gylch)**  | nofio ychydig mewn pwll | nofio’n hyderus mewn pell | nofio’n hyderus yn yr awyr agored, h.y. llyn/môr |
| Rhowch fanylion am unrhyw **wybodaeth feddygol** y dylem ei gwybod e.e. cyflyrau meddygol, alergeddau (Os dim, nodwch “DIM”) |
| **A gawsoch bigiad tetanws cyfredol?** |  |
| A oes unrhyw beth a allai eich atal rhag cymryd rhan yn unrhyw un o’r gweithgareddau? (Os dim, nodwch “DIM”) |
| Rhowch fanylion am unrhyw **ofynion deietegol arbennig** sydd gennych e.e. alergeddau, crefyddol, llysieuwr. (Os dim, nodwch “DIM”) |
| Ydych chi’n adnabod unrhyw un arall sy’n gwneud cais i ddilyn y cwrs hwn? Os ydych, nodwch ei enw/eu henw  |
| Sut glywsoch chi am y cwrs hwn? |  |

Dychwelwch eich ffurflen gais i storeyarms@caerdydd.gov.uk neu yn y post i Canolfan Storey Arms, Libanus, Aberhonddu LD3 8NL Rhaid cael blaendal na ellir ei ad-dalu o **£75** i gadarnhau’ch lle

* Gwnewch sieciau’n daladwy i “Cyngor Caerdydd” a’u hanfon â’r ffurflen
* Neu gallwch dalu dros y ffôn â cherdyn debyd/credyd. Ffoniwch 01874 623598 Llun-Gwener rhwng 9.30am a 4.00pm

**Dyddiadau cau ar gyfer ceisiadau: 31 Mai 2019**

Cofiwch y gallwn ond dderbyn 3 unigolyn o’r un uned Dug Caeredin. Rhaid i bob myfyriwr anfon ei ffurflen gais a’i flaendal ei hun.

Data personol: Rwy’n deall y bydd y manylion a roddir uchod yn cael eu cadw ar eich cronfa ddata i
*(ticiwch y blwch)* helpu â gweinyddu trefniadau archebu cyrsiau yn unol â rheoliadau Cyngor Caerdydd

STOREY ARMS CENTRE

APPLICATION FORM

|  |  |
| --- | --- |
| **Course Dates**  | **Monday 19 to Friday 23 August 2019** |
| **Name** |  | **Sex** |  |
| **Address** |  |
|  |
|  | **Post code** |  |
| **Telephone** | **Home** |  | **Mobile** |  |
| **Email** |  |
| **Date of Birth** |  | **Age (at start of course)** |  |
| **Name of your D of E Unit/Group** |  | **DofE Participant ID** |  |
| **Can you swim?** |  | **If YES, are you able to… (circle answer)** | swim a little in a pool | swim confidently in a pool | swim confidently outdoors, i.e. lake/sea |
| Please give details of any **medical information** which we should be aware of, e.g. medical conditions, allergies. (If none, write “NONE”) |
| **Do you have a current tetanus injection?** |  |
| Is there anything which may prevent you from participating in any of the activities? (If none, write “NONE”) |
| Please give details of any **special dietary requirements** you may have, e.g. allergies, religious, vegetarian. (If none, write “NONE”) |
| Do you know anyone else applying to this course? If so, please give their name(s) |
| How did you hear about this course? |  |

Return your completed application form to storeyarms@cardiff.gov.uk or by post to Storey Arms Centre, Libanus, Brecon LD3 8NL A non-refundable deposit of **£75** is required to confirm your place.

* Cheques should be payable to “Cardiff Council” and sent with your booking form
* Alternatively you can pay over the phone by debit/credit card. Please call 01874 623598 Monday-Friday between 9.30am – 4.00pm

**Closing dates for applications: 31 May 2019**

Remember that we can only accept 3 people from the same D of E unit. Each student must send in his/her own application form and deposit.

Personal data: I understand that the details given above will be held on your database to assist in
*(tick box)* administering course bookings in accordance with Cardiff Council regulations