



CANTERBURY CATHEDRAL COMPANY OF CHANGE RINGERS

Visiting Bellringer Registration Form

1. Visitor Information

Date of Visit: _____

Full Name: _____ Age (if under 18): _____

Home Tower (if any): _____

Ringing Experience (approx. years): _____

Level of Proficiency (e.g., Rounds, Plain Hunt, Grandsire):

Are you a member of a ringing association or society? (circle one): Yes No

If yes, which one? _____

2. Emergency Contact Information

Emergency Contact Name: _____

Emergency Contact Phone Number: _____



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3. Health, Safety & Safeguarding

Do you have any medical conditions we should be aware of in an emergency?

(Optional, but encouraged)

Are there any safeguarding issues that we should be aware of?

(This will be treated confidentially and only shared as necessary)

I confirm that I am physically fit to climb approximately 70 stairs, to ring, and that I understand the safety protocols of ringing in this tower.

I will be briefed on and agree to follow the tower's safety rules and ringing guidelines.

Signature: _____ *(Parent or guardian if under 18)*

Date: _____



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5. Tower Captain Notes (for internal use)

Notes:

Approved: Yes No

**PLEASE RETURN THIS FORM BY EMAIL TO THE TOWER CAPTAIN
(bellringers@canterbury-cathedral.org) AT LEAST THREE WORKING DAYS
AHEAD OF YOUR PROPOSED VISIT. CONFIDENTIAL DECLARATION MUST
BE RETURNED BY ALL APPLICANTS OVER 16 YEARS OLD.**

**YOU SHOULD NOT ATTEND UNTIL YOU HAVE RECEIVED WRITTEN
CONFIRMATION BY EMAIL.**