## Black Rock Outdoors Ltd Booking form

| Organisation Name:                              |      | Contact:                       |   |
|---|------|--------------------------------|---|
| Address:  |      | Invoice Address (If different) |   |
|   |      |                                | , |
| Telephone No:<br>Mobile:                        |      | Email:                         |   |
| Size of group:                                  |      | Ages(if under 18):             |   |
| Number of Your Leaders/Parents during activity: |      | Any medical concerns?          |   |
|   |      |                                |   |
| Activities to be booked                         | Date | Time                           |   |
|   |      |                                |   |
|   |      |                                |   |
| Payment by: Card / Cheque/ cash                 |      |                                |   |
| Deposit Invoice Number:                         |      | Deposit Invoice Date:          |   |
| Balance Invoice Number:                         |      | Balance Invoice Date:          |   |
|   |      |                                |   |

I have read Black Rock Outdoors Ltd 'Terms and Conditions' and wish to book the above activity session. (signed)

date

email to info@blackrockoutdoors.co.uk