

Booking form

Please complete and send to the appropriate booking secretary.

Choice of Holiday		
Dates:		
Surname	Forename	Boy / Girl
Date of Birth	Age on first day of holiday Yr <input type="checkbox"/> M <input type="checkbox"/>	School Year <input type="checkbox"/>
Swim 50m Yes / No	Weight	Height Shoe Size
School	Church if attended	
Parent's / Guardian's Title, Initial and Surname		
Address		
Post Code		
Tel:	Email:	

I approve of his / her taking part in the activities of the chosen holiday. I understand that the information supplied will be held on computer and give my consent for this. I have read the information for parents including the full small print on the website and agree to comply to with it.

Signature of Parent or Guardian _____ Date: _____

Does your child require a special diet?

Yes No

If yes please give details

Does your child currently have, or have they recently had any major disability, illness or behavioural problem?

Yes No

If yes please give details

I enclose: (please tick as appropriate)

- £40 non-refundable deposit and will remit the balance eight weeks before the holiday (Ski Runton, Arca Moldova or Surf Romaia deposit £60)

- Full Fee

Cheques made payable to:
West Runton Holidays