

## Woodland Learning

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### Booking Form

Please print out and complete the booking form and send with a cheque made payable to Woodland Learning.

Please see web site for more information on dates and prices. Please pay in full before any course, event or party. There is a £20 non-returnable booking fee for all courses, events and parties costing more than £100. The remaining amount will be refunded if you cancel at least 14 days before that course, event or party. A £10 booking fee will be charged for all other courses and events, including those that are free, if you do not cancel at least 7 days before that course or event.

A receipt, joining instructions and details of what to bring will be sent or e-mailed to you. Please note this is a general booking form and not all sections are relevant for every course, event or party. Please complete as appropriate.

Adult's Name/s \_\_\_\_\_

Child/ren's Name/s (*not trips*) \_\_\_\_\_

Child/ren's Age/s \_\_\_\_\_ Date/s of Birth \_\_\_\_\_

School/Group name (*trips only*) \_\_\_\_\_

Number of adults \_\_\_\_\_ and children \_\_\_\_\_ in group/ party.

School or home address including postcode \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

Daytime Phone number \_\_\_\_\_ Mobile \_\_\_\_\_

Evening Phone number \_\_\_\_\_

I/we/my child/ren/Our school/Our Group want to book a place on a Forest School Course/ a place on a Willow Course/ a place on a Young Person's Forest Skills Course/ Places on a Family Woodland Event/ A School trip/ A Group trip/ A Birthday Party.

On (date/) \_\_\_\_\_ Time. From \_\_\_\_\_ To \_\_\_\_\_

Taking place at Stanton Park/ Cuckoo Pen, Coleshill/ Macaroni Wood/ Pentylands, Highworth/ Quenington/ Highworth Town Council/ Other.

A cheque for £ \_\_\_\_\_ is enclosed *or* I require an invoice for £ \_\_\_\_\_

The experience/qualifications I have for working with children/working in woodlands is *(Forest School courses only)* \_\_\_\_\_

\_\_\_\_\_

Please list any special needs that you/your child/ren/ group members/ may have and what we need to do to accommodate them. Is there a medical condition/allergy we need to be aware of? \_\_\_\_\_

\_\_\_\_\_

Please list the theme/ outcomes for your party or trip and any particular activities you would like. \_\_\_\_\_

\_\_\_\_\_

The emergency contact for me/ my child/ the school/group office is:-

Name \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile \_\_\_\_\_

I do/ do not give permission for life saving medical treatment for my child if you are unable to contact me or the emergency contact.

I do/do not give permission for photos to be used for publicity. *(For schools, groups and parties do not give permission unless everyone consents)*

**I have completed this form with all the relevant information and I am happy with the terms and conditions of payment.**

**Signed** *(parent or guardian for children)* \_\_\_\_\_

**Date** \_\_\_\_\_

Thank you. Please return to the address at the top of the form.