Calshot Activities Centre Individual Booking Form

Course (1st choice): Date: Course No:

Course (2nd choice): Date: Course No:

Name (Mr, Mrs, Miss, Ms): Age:

Address:

Post code:

Telephone (include code) evening: Daytime:

Mobile: Email:

Do you require a residential place? ☐ Yes ☐ No I would like to share a room with:

Experience: please indicate level of performance and list awards held:

Details of special diet required: ☐ Yes ☐ No

Details of any physical disability: ☐ Yes ☐ No

Do you have any medical condition of which we should be aware? ☐ Yes ☐ No

Please give details.

Person with parental responsibility for young person, (if under 18 years) please complete this section

Date of birth if under 18: day / month / year

I give my permission for my son/daughter to participate in the above course and confirm that they can swim 50 metres in light clothing.

Signature of person with parental responsibility:

Please note: A detailed medical questionnaire will be sent out for all U18s once a booking has been made.

I understand that:

- Refunds due to cancellation will be in accordance with our booking conditions.
- It is my responsibility to arrange appropriate insurance against cancellation, personal accident and personal liability.
- I am declaring I can swim 50 metres in light clothing (all courses with water activity), and declare that I am physically fiit to take part except for any medical conditions which I have detailed above.
- I accept all booking conditions by signing this form.
- Calshot Activities Centre can accept no responsibility for vehicles parked at the centre.

Signature: Date:

Data protection act 1998. The above information will be used only to process the booking and for our mailing list. If you do not want future brochures, please tick here ☐

Occasionally, we take photos of participants for publicity, including for use on our own website. If you object, please tick here ☐

Please tick if you require any of these brochures : ☐ Education ☐ Corporate ☐ Summer ☐ Velodrome

Office use only

£ Receipt number (Deposit) £ Receipt number (Balance)

Date entered on course list and joining instructions sent:

Payment details

Additional bed and breakfast accommodation. Dates required: @ £24.50 /night £

Course fee: £

Single room occupancy supplement: £10.00 per night (subject to availability) £

Cheques to be made payable to *'Hampshire County Council'* **Total £**

Method of payment ☐ Cheque ☐ Maestro ☐ Mastercard ☐ Visa

Card holders address *if different from above*:

Postcode

Amount £ Card holders name:

Credit card details will be destroyed once payment has been taken

Card no: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Maestro Only

Issue ☐☐ Start date ☐☐☐☐ Expiry date ☐☐☐☐ Security no: ☐☐☐

Please complete and return to: Booking Office, Calshot Activities Centre, Calshot Spit, Fawley, Southampton SO45 1BR