

Dunmore East Adventure Centre

Activity Booking Form 2010

Name _____ Tel number: _____

Address: _____ Email Address: _____

_____ Medical conditions: _____

Name of course: _____ Course Date: / / Price per participant: _____

Age of participant- _____

ADDITIONAL GROUP BOOKING DETAILS-

Group Name- _____ Group leaders- _____

Age of group (if under 18) _____

Number in Group: _____ Male: _____ Female: _____

I have enclosed my non-refundable deposit of-
 - **INDIVIDUAL BOOKINGS** €100 or 50% - **GROUP BOOKINGS** €500 or 50%

Booking Conditions

1. A non refundable deposit must be paid on booking, with the balance payable no less then 2 weeks before arrival at the centre
2. If D.E.A.C. is unable to place you on a suitable course then the deposit will be returned.
3. Participants with any medical conditions, illness, injury or any medication must provide evidence that they are suitable to take part in activities. **A medical certificate is required for this purpose.**
4. **Persons partaking in water activities must be water confidant.** If unsure, please contact the centre to discuss suitability.
5. Persons must be generally physically fit to take part in all activities
6. Persons must be willing to comply with all safety regulations and carry out instructions as requested by the staff at the centre.
7. D.E.A.C. reserves the right to cancel or alter any programme as it deems necessary. In the event of cancellation an alternative programme or date can be arranged.

I HAVE READ AND UNDERSTOOD AND AGREE TO ALL OF THE ABOVE CONDITIONS.

SIGNED: _____ (PARENT ,GUARDIAN OR GROUP LEADER IF UNDER 18)

Credit card Booking-

Subject to 2.5% booking fee

Card Holder Name: _____ Holder's Address: _____

Card Number _____ / _____

Card Type: Visa Master card Amex Laser

Expiry- / / . Security Code ___

Amount to be deducted- € _____ Signature- _____

How did you hear about the centre??? Previous visit Radio Paper Friend
 School tour Exhibition local business (if so, which business; _____)

OFFICE USE ONLY:

DEPOSIT RECEIVED T AMOUNT RECEIVED: _____ DATE RCVD : / /

Please return to- Dunmore East Adventure centre, Dunmore East, Co Waterford