



LINCOLNSHIRE SCOUT FELLOWSHIP PARASCENDING CLUB

GROUP BOOKING FORM
(PLEASE USE BLOCK CAPITALS & PRINT CLEARLY)

GROUP LEADER / CONTACT

First Name:..... Surname:.....

Address:

..... Postcode:.....

Telephone Evening: Telephone Day:.....

Mobile: Email:

Alternative Contact

First Name:..... Surname:.....

Telephone Evening: Telephone Day:.....

Proposed date for booking:...../...../..... Group Name:.....

No	List of Names of Group	Date of birth	Deposit
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

Notes:

Total Deposit enclosed

- Each member of the group must complete an **Individual Booking Form and attach.**
- Places will only be held for the number of deposits received cheques payable to 'Sky Lincs'.
- Please return all Individual Booking Forms and deposits **not less than one month before the course date** to: **Jim Pitts, Bookings Administrator, Sky Lincs, 133 Crofton Road, Orpington, Kent, BR6 8JA**

To conform to the UK Data Acts you are advised that the information above may be stored on computer for Club use only. Please notify us if you object to this arrangement