

Day Booking Form

|  |  |
| --- | --- |
| Name of Group |  |
| Name of person in charge |  |
| Address |  |
| Phone number |  |
| Email |  |
| Purpose of visit |  |
| Date From |  | Arrival time |  |
| Date To |  | Departure time |  |
| Estimated total numbers attending |  |

|  |  |
| --- | --- |
|  | Please Tick |
| I confirm I have read and understand the booking information |  |
| I confirm I have enclosed the fee of*Cheque made payable to The Guide Association Shropshire* | £30 half day |  |
| £60 full day |  |
| I confirm that I have made a bank transfer for the fee of *The Guide Association Shropshire sort code 30 18 55 account 00724365***Please use your group name as your payment reference** | £30 half day |  |
| £60 full day |  |

|  |  |
| --- | --- |
| Signed |  |
| Date |  |

This form to be completed and returned to:

Email: lyneal@girlguidingshropshire.org.uk

Mrs Mary Howard, 38 Wem Road, Shawbury, Shrewsbury SY4 4NW 01939 250741