**Booking form**

**Full Trading Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Activity to be carried out:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of Lead Contact:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email address of Lead Contact:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mobile phone number of Lead Contact:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Number of participants:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Age Range** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**------------------------------------------------------------------------------------------------------------------------------**

**Venue required (delete as appropriate):**

3G PITCH (1/3) 3G PITCH (FULL) TENNIS COURT

ASTROTURF (1/3) ASTROTURF (FULL) SQUASH COURT

SPORTSHALL (1/3) SPORTSHALL (1/2) SPORTSHALL (FULL)

EXERCISE STUDIO NETBALL COURTS STRENGTH AND CONDITIONING SUITE

**Are changing facilities required?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**------------------------------------------------------------------------------------------------------------------------------**

**Day requested (please circle)**  M T W Th F Sa Su

**Dates From:** \_\_\_/\_\_\_/20\_\_\_ **To:** \_\_\_/\_\_\_/20\_\_\_

**Start time requested** \_\_\_\_\_\_\_\_\_am/pm **End time requested** \_\_\_\_\_\_\_\_\_am/pm

**I confirm that I have read the terms and conditions attached and will be responsible**

**for ensuring that all participants abide by these for the duration of the booking.**

**Signature of Lead Contact:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return this form to** [**sportbookings@hope.ac.uk**](mailto:sportbookings@hope.ac.uk)

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For office use only:

Booking has been APPROVED / NOT APPROVED

Are there any special terms for this booking? If yes, please provide details.

Discount applied for block booking?

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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