

BURREN OUTDOOR EDUCATION CENTRE

ADVENTURE CAMP INDIVIDUAL BOOKING FORM



Please contact our office on 065 7078066 or burroec@eircom.net to confirm availability before returning this form.

Adventure Camp Dates:

Participant's Name:

Tick: Male	Female
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Address:

Date of Birth (D/M/Y) :

Age during camp:

Please tick : Residential or day visitor

How many previous camps at B.O.E.C. have you attended? Years:

Emergency Contact Details – Parent / Guardian

Phone No: (H)

Mobile:

Phone No: (W)

E-mail:

Any Special Dietary Requirements?

Any medical conditions the staff should be aware of?

If you wish to be grouped with friends please list names

PLEASE NOTE BOOKINGS WILL ONLY BE CONFIRMED ON RECEIPT OF A NON REFUNDABLE DEPOSIT OF €80 TOGETHER WITH THIS SIGNED BOOKING FORM ONE MONTH BEFORE THE CAMP. LATE CANCELLATION MAY INCUR A FEE.

If my application is accepted, I agree that my child will abide by such regulations as Clare V.E.C. or its representatives may consider advisable to make, in order to secure the safety and comforts of those taking part in the camp. I understand that the courses run at the B.O.E.C. are hazardous by their very nature.

Signature of Parent/Guardian **Date**