

BOOKING FORM

Northampton Watersports Centre

Course _____ Date(s) _____

Participant (First Name) _____ (Last Name) _____ Age _____ years M/F

Address _____

Postcode _____ Email _____

If you'd like to receive our E-newsletter with details of special offers and courses, please tick here and complete your email address above.

Telephone: Day _____

Next of Kin _____ Tel _____ Relationship _____

Relevant Experience including any pre-course requirements _____

Where did you hear about us? Internet site Recommendation Yellow Pages

Brixworth Country Park Other _____

Medical Conditions: YES / NO

Allergies / Asthma / Epilepsy / Heart Conditions / Impetigo

Other _____

Please continue on back of form if needed.

Declaration

- ◆ I am / my child is fit for the activity, and I have informed you of any medical conditions I / my child have / has.
- ◆ I am / my child is confident in water and can swim 25 metres
- ◆ From time to time authorised parties may carry out photography. I agree that NWC may use such images in promotional, advertising or publicity material in any format what so ever.

I agree to the booking conditions shown opposite

SIGNED _____ (by Parent/Guardian for under 18 years)

Print Name _____ Date _____

Please return to:

Northampton Watersports Centre, Pitsford Water, Brixworth, Northampton, NN6 9DG

For Office Use ONLY:

Fee paid £ _____ cash/cheque/card Date Rcd: _____ Letter Confirmation _____ Staff initials _____

Balance Due £ _____ Paid _____

Booking Details – Please fill in your details

Course Cost £ _____ I enclose £ _____ deposit (£50) or total course fee

Please make cheques payable to **Northampton Sailing Club.**

All courses should be paid 4 weeks before the course commences.

VISA/ACCESS/SWITCH Name on card _____

Card Number _____ / _____ / _____ / _____

Start Date ___ / ___ / ___ Expiry Date ___ / ___ / ___ Issue Number (switch) ___ Security Code _____

Please note: a 3% handling charge will be incurred when using a card