



GROUP BOOKING FORM

PEAT RIGG

Outdoor Training Centre
Cropton
Pickering
North Yorkshire
YO18 8EX

Dates required (confirmed by Peat Rigg)

Name of group leader

Name of organisation

Contact address

_____ City/town	_____ County	_____ Post code
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_____ Home telephone number	_____ Work	_____ Mobile
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_____ Number in your group	_____ Male	_____ Female
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_____ Number of Staff	_____ Male	_____ Female
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Total number

DISCLAIMER

I understand that as group leader I have full responsibility for the actions of my group. I have read the booking conditions and agree to be bound by them.

I accept that Peat Rigg Outdoor Training Centre is not under any liability whatsoever in respect of loss or damage to personal property, not caused by the negligence or default of Peat Rigg Outdoor Training Centre, it's suppliers and employees whilst attending the course.

_____ Signed	_____ Date
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