

## BOOKING FORM

Name 1:
Date of birth:
Name 2:
Date of birth:
School:
Class:
Parent Name:
Parent Mobile 1:
Parent Mobile 2:
Address (if not a member of GLTC):
Home Phone:
Email:
Any medical issues or relevant information
Any special instructions
Member of Greystones L.T.C. : Yes No No
I would like to book for Camp (Please Tick): 1 2 3 4 5 6 7
If booking by day, I would like to book for the following days only for the above camp:  Mon Tue Wed Thu Fri
Photo consent: Sometimes we may take photos during the camp. These may be used in promotional materials such as brochures and posters on our club website and or club Facebook page. Please indicate whether you give permission for photos to be taken of your child.
I give my consent for photographs to be taken of my child Yes No
I enclose a cheque for €

To book, please return booking form together with payment to

Greystones LTC, Mill Road, Greystones, Co Wicklow.
You can also book by contacting Alan on 0872225298