

CRS ADVENTURES LTD

Booking Form

NAME OF GROUP:

NAME OF GROUP ORGANISER:

ADDRESS:

.....

.....

TEL NO:

FAX NO:

EMAIL:

DATE OF TRIP FROM:**TO:**

ARRIVAL TIME: **DEPARTURE:**

FIRST MEAL: **LAST MEAL:**

NO. CHILDREN: BOYS **GIRLS**.....

NO. TEACHERS/HELPERS

ACTIVITIES YOU WISH TO BE IN YOUR DRAFT TIMETABLE:

Please circle the activities you would like to do.

Day Activities:

Rock Climbing & Abseiling

Zip Wire

Indoor Climbing & Bouldering

Pamper Pole

Low Level Walks

Jacob's Ladder

Kayaking

Crates

Open Canoeing

Balance Beams

Improvised Raft Building

High V's

Caving

Mountain Biking

High Ropes Course

Evening Activities:

Round Robin

Shelter Building

Dart About

Orienteering

Hembury Walk

Search & Rescue

Mini Olympics

PROVISIONAL DATE FOR PARENTS' EVENING VISIT:

First Choice

Second Choice

SIGNED:

DATE: