



## Thornbridge Outdoors at Underbank Enquiry Form

**PLEASE USE BLOCK CAPITALS and complete all pages**

Date(s) of potential visit: 1<sup>st</sup> choice:

2<sup>nd</sup> choice:

### Group details:

Organisation/Group:

Number in group:  Age of group members:

Number of staff:

Intended arrival time:  Intended departure time:

Preferred activities:

<input type="checkbox"/> Climbing tower	<input type="checkbox"/> Kayaking
<input type="checkbox"/> Leap of Faith challenge	<input type="checkbox"/> Countryside walk
<input type="checkbox"/> Zip wire challenge	<input type="checkbox"/> Weaselling
<input type="checkbox"/> Raft building	<input type="checkbox"/> Team building tasks
<input type="checkbox"/> Canoeing	<input type="checkbox"/> Orienteering

Programme details:

### Group leader contact details:

Surname  Initials  First (Known) Name  Title

Role/position in above organisation:

Address:

Postcode:

Telephone (day)  Mobile  Email

