

ACCOMMODATION BOOKING FORM

Final numbers will be required no later than two weeks prior to the arrival date



enterprises
play learn enjoy

| | | | |
|-----------------------------|--|-----------------|--|
| Name of Organisation | | | |
| Contact Name | | | |
| Contact Address | | | |
| | | Postcode | |
| Contact Tel No | | Mobile | |
| E Mail | | | |

DETAILS

| Arrival Date | Arrival Time | Departure Date | Departure time |
|--------------|--------------|----------------|----------------|
| | | | |

EVENT DETAILS

| | | | | | |
|---|---|----------------------|--------------------------|-----------------------------------|--|
| Total Number of Guests | | Adults | | Children (Under 18 yrs) | |
| Please indicate the split between male and female guests | Male Adults | <input type="text"/> | Male Children | <input type="text"/> | |
| | Female Adults | <input type="text"/> | Female Children | <input type="text"/> | |
| Catering requirements | <input type="checkbox"/> | FULL BOARD | <input type="checkbox"/> | B&B only | |
| Full Board = breakfast, lunch (packed lunch available) & Dinner | Other (please state) <div style="border: 1px solid black; height: 150px; width: 100%; margin-top: 5px;"></div> | | | | |

| | |
|---------------------------|--|
| Other Requirements | |
|---------------------------|--|

| | |
|-------------------|--|
| Signature | |
| Print Name | |
| Date | |

Please return the completed form to:

Enterprises, Truro School Trennick Lane Truro TR1 1TH

Email: enterprises@truroschoo.com

Tel No 01872 246050 or 246052

Fax: 01872 246080

FOR OFFICE USE ONLY

| | | | | | | | |
|---------------|--|----------------|--|------------|--|-------------------|--|
| Date Received | | Date Confirmed | | Invoice No | | Invoice sent | |
| Booking Pro | | Catering | | Caretakers | | Contract No | |
| Cleaning | | | | | | Facilities Co-ord | |
| Notes | | | | | | | |