



Booking form Day/Part Day/Evening

Form to be returned by post or email to:
Janet Davis
168 College Hill Road
Harrow Weald
HA3 7BY
jd168@icloud.com

Name of Unit / O	rganicat	ion						
Hame of Offic / Of	igailisat	1011						
Type of Event				Approx. Nos.		Male or disabled toilet needed? Y / N		
Guiding County		Division		District				
Arrival Day & Date		Arrival Time		Departure Time		No. Cars (expected to stay on site)		
Please mark the f	facilitie:	s you require	with a cros	ss (x) :-		•		
Campsites					W	illow Tree Ho	low Tree House	
Squirrel	+S	helter	+Pat	+Patrol Cooking		nole House		
Fox	+S	helter	+Pat	rol Cooking		Training Room & Kitchen		
					Piı	ne Lodge		
Badger +S		helter +Pa		Patrol Cooking		aining room		
						tivity room		
to the key box This is especial • The leader nee	should b esponsib or to th lly impor eds to ar	e the person re le for collectin e Checking Coo rtant during the rive at least 15	esponsible for g the keys of rdinator as e summer m minutes be	or the event. NB and returning the	The site in m promposition promposition in the site of	is not staffed. tly afterwards se the site. nsible for man	ning the	
Leader's Name		Address				Postcode		
Mobile no		Email				Home/work no		
Deposit enclosed (non returnable); payable to WILLOW TREE CENTRE or bank payment to Willow Tree Centre, 20-73-53, 30698660						£		
A confirmation of befor your receipt. THE BOOKING IS NO							n SAE	
I have read the te	erms and	d conditions ar	nd agree to	abide by them.				
Signed		Posi	ition				Date	