Adventure Valley School Booking Form

# Day of visit Group name

Date of visit Booking Name

Address

Telephone Email

*Don't miss out on Adventure Valley E-newsletters and offers. Tick this box to opt out*

**Number in**

**Group** *For Office Use Only*

**Children Aged 2-12** @ £6.50 off peak x = A

**Under 2 on day of visit** *Free at all times Wristband Color*

**\*Free Adults** *1 adult : 5 paying children*

**Extra Adults** @ £6.50 off peak x = B

**Extra Adults Over 60** @ £6.00 off peak x = C

**Farm Stationary Sets** *£1 each* x £1 = D

**\*\*Cabin Hire (Please Tick)** *£12.50* x £12.50 = E

A minimum of 20 paying children is required to qualify for the discounted group rates and free adults.

\*1 free adult per two SEN children \*\* Cabins can be requested for hire but availability cannot be guaranteed.**Educational Supplement** F

**Total (A+B+C+D+E+F)** G

**Visits must be provisionally booked by telephone. This form must then be Deposit Paid** H

**returned with a minimum, non-refundable deposit of £2 per child a minimum**

**of 7 days prior to your visit**

**Educational Options (please tick the package you would like. More info can be found on our website)**

Farmers with Animal Encounter £1.50 supplement per child

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Minibeast Madness £1.50 supplement per child *Only available on weekdays*

Café Italia Pizza Chefs £2.00 supplement per child

Freeplay - no special event - we'd like to just come and play!

*during term time*

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| I have read and agree to the terms and conditions at  [www.adventurevalley.co.uk](http://www.adventurevalley.co.uk/) | | | *To be completed on the day of visit* | | |  |
| **Balance Due** | | G-H |
| Name Signature  Date |  |  | I wish to be invoiced for the balance shown at this email address: | | | |
|  |
|  | Signed: |  | |  |
| *Office Use: chq, csh, cd Intial:* | | | Position:  Date: |  | |  |
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