



SCHOOLS TERM TIME BOOKING FORM 2016 -2017

Application Details

School Name:
Address :
Telephone:
Email address:
Contact name :

Booking Requirements

	Day	Time
1 st Pref		
2 nd Pref		
3 rd Pref		

No of Children:
Age range:
Date to commence:
No of Weeks required:
Ability range:

Signed _____

General information

This form is not a guarantee of booking all or part of the pools complex at Bailieborough Leisure Centre.

Please fill in all relevant details and your application will be processed where possible, dependent on pool availability.

Note you will be allocated part of the pools complex as required for the number of pupils.

See over for Rules and Regulations

Office use only

Date accepted _____

Slot confirmed _____