



Petersburg Outdoor Education Centre,
Clonbur, Co. Galway,
Ireland.

Email: info@petersburg.ie
Tel: 094 954 6483
Fax: 094 954 6705

BOOKING FORM

Name of group: _____

Address: _____

Contact Person: _____ Title (P.E, Teacher, etc.): _____

Work Ph. No. _____ Home No. _____ Mobile No. _____

E-mail address: _____

Date of Course: _____ Residential Yes No

Arrival Time: _____ Departure Time: _____ Meal on Arrival Yes No

Programme required: _____

Age Group: _____ Total Number: _____ Male: _____ Female: _____

Total Number of Swimmers: _____

No. of Organisers: _____ Male: _____ Female: _____

Any illnesses or health problems? _____
(These will remain in strict confidence) _____

Any special dietary requirements? (No. of vegetarians, etc) _____

Office Use only

Invoice No: _____ Registration: _____ OTB No. _____

Price per person: _____ Deposit Enclosed: _____

Receipt No. _____ Date: _____ Lodgement No. _____

Balance paid: _____ Receipt No. _____ Date: _____ Lodgement No. _____

Were you ever in Petersburg before? _____ Last Visit (Year) _____

Where did you hear about us? _____

Were you ever at another Adventure Centre before? (which one) _____

Any other relevant information? _____

Signed: _____ Date: _____

Allow Photos of Your Group to be used on the Petersburg Website: Yes No