

## Participant Information.

Last Name		
Sex		
Weight (kg)		
Can they can swim 50m? (required for Broads Adventure) Yes / No		
Dietary needs		
Additional Information (Please include details details of any medical, behavioral, special		
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Previous West Runton Holidays (if any)		

<b>Booking Information</b> . (about the the <b>parent or guardian</b> of the young person)	
Your Name	Your phone number
Your address	
How did you first hear about West Runtor	n Holidays?
Data Storage* We will store data about you and your child for that required for safeguarding record keels of the consent to this data being stored.	
Yes / No (delete as applicable)	
T&C I have read and agree to the booking terms described in Information for Parents <a href="https://westruntonholidays.org/booking-information">https://westruntonholidays.org/booking-information</a>	
Yes / No (delete as applicable)	
Signed:	
	Parent or guardian

## **Payment**

Please send this form with a cheque payable to **West Runton Holidays** with this form for the deposit amount on the website (or full fees if less then 6 weeks before the holiday) to **West Runton Holidays**, **3 Andrews Way**, **Marlow SL7 3QJ**