

## CONFIRMATION OF ECO CHALLENGE BOOKING

**PLEASE NOTE:** to confirm your booking this form must be faxed back to 01743 852101 within 5 working days of making a provisional booking

This form must be completed and signed by the member of staff taking responsibility for and attending the *Eco Challenge* course and by a member of the Senior Management Team

**School Name:**

LEA:

Address:

### Residential Course Details

Name of FSC Centre:

Course start date:

Course end date:

Number of students:

Male:

Female:

Number of Accompanying Staff :

Male:

Female:

Accompanying staff must be in a ration of 1:10. Once numbers are over 20 then an additional member of staff must accompany the group eg. 21 students must be accompanied by 3 members of staff.

### Post Course Options (please circle your preferred 3 day post courses activity)

- Environmental Surveys
- Environmental Interpretation
- Educational Visits
- Improvements to School Grounds
- Work with environmental organisations/countryside staff

### *To help Centre and Project staff cater for all students and staff please provide the following details*

Year group of students \_\_\_\_\_ If you have chosen a mixed group from across KS 3 please specify the year group and number of students in each

What factors will you use to select the students taking part?

Would you like a Project Officer to visit school to give a briefing/presentation on the Project? Yes/No

### Declaration:

**I have read the Eco Challenge School Agreement and Booking Conditions and understand that the school will enter into an agreement with Eco Challenge when a deposit is paid. I understand that Eco Challenge consists of a 3 night residential and 3 post course sessions in school.** (The request for deposit and agreement will be sent to the school on receipt of this confirmed booking.)

### Course Organiser

**Signed:**

Name:

Job Title:

Tel:

E-mail:

Contact details of member of staff who will be leading the group through the Eco Challenge course **if not** course organiser.

Name:

Tel:

### Senior Management Team

**Signed:**

Name:

Job Title:

Fax:

E-mail:

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