



Team Building Day - booking form

Group/ organis	sation							
Course organi	ser							
Group leader								
(attending the course)								
Address				Invoice nam				
				and address	6			
				(if different)				
				Mobile				
Daytime telephone no.			telephone no.					
Email address				Number atte	ending			
Date(s) reques	sted				<u> </u>			
Arrival time				Departure	time			
What are the aims and learning objectives for your course? Examples – leadership skills, teamwork,								
building confidence, problem solving or developing positive attitudes.								
1.								
0								
2.								
Are there any a	ctivities that	vou would						
particularly like to include in								
programme? Please list.								
Any other inform								
(e.g. wheelchair								
needs, medical	iniormation)							
Food/drink requirements and required								
·								
Please enter y	our DCC C	Cost Centre fo	or internal ch	narging (if app	olicable)			
Signature					Date			
Please return this form to:								
Lea Green Learning and Development Centre, Main Road, Lea, Matlock, Derbyshire, DE4 5GJ								
Tel: 01629 534561 or email: leagreen.admin@derbyshire.gov.uk								

FOR OFFICE USE ONLY:											
Dates offered		No of adults				No of staff					
		CU Shee	et			MU Sheet					
Provisional costing:		CONFIRMATION LETTER		ION	Post						
					E-mail						
Invoice No		Date				Amount					