

Provisional costing:

Invoice No



Residential – course booking form

_							
Group/							
organisation							
Group leader							
Address			Invoice na	ame			
			and addre	ess			
			(if differer	nt)			
			,	,			
Daytime							
telephone no.			Fax no.				
Mobile							
telephone no.			Email add	ress			
Date(s)							
requested							
Arrival time	rrival time			Departure time			
			•				
No. of students		ge range of			No. of	staff	
	students				110. 01	otan	
What are the aims and learning objectives for your course?							
(Examples – teamwork, building confidence, problem solving, developing positive							
attitudes or independence)							
1.							
1.							
•							
2.							
Are there any activities that you would							
particularly like to include in your							
programme? Please	list.						
Do you want the cou	rse to support/meet						
any other curriculum objectives? Please							
give details.							
Any other information	1						
(e.g. wheelchair acce	ess, additional						
needs, medical inforr	nation)						
Diagon enter your DCC Contro for internal observing (if analisable)							
Please enter your DCC Cost Centre for internal charging (if applicable)							
Signature							
- 5				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							
ien ereze ee iser er enden lougroomdamm Guerbyonneigeridt							
FOR OFFICE USE	ONLY:						
Datas affected			No of			No of	
Dates offered			students			staff	

Date

CU Sheet

LETTER

CONFIRMATION

MU Sheet

Amount

Post

E-mail