



SPORTS HALL APPLICATION BLOCK BOOKINGS

Member Name

BOOKING DETAILS			
DAY	FIRST DATE	LAST DATE	TIME
EXCLUDED DATES			

1ST Contact

Title Surname Forename(s)

Address

City/ Town		Post Code	
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Day Phone Eve Phone Moblie

e-mail address Occupation

2ND Contact

Title Surname Forename(s)

Address

City/ Town		Post Code	
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Day Phone Eve Phone Moblie

e-mail address Occupation

I/We hereby apply for hall booking at the banks o’Dee Sports Club. I/We agree to abide by the Block Booking Agreement overleaf

Signature (1st Contact) _____ Name in Block Capitals _____ Date ___/___/___

Signature (2nd Contact) _____ Name in Block Capitals _____ Date ___/___/___

Cancellation Policy

Less than 1 weeks notice 50% charge
 Less than 48 hours notice **FULL** charge