

TRAINING COURSE BOOKING FORM

This booking form can be used for all <u>individual</u> adult training course bookings. One form per person. **Book online @ www.kilfinaneoec.com**

Name :						
Address:						
Telephone:	Mobile:		Email:			
Course Title:						
Date of Course commencement:						
Name & telephone number of a person we can contact in the event of an emergency						
Name:		Mobile:				

Where did you hear about this course ? (please tick all relevant) Received email Kilfinane OEC website Google search Poster/ Advert Friend or associate Other _____

PLEASE NOTE BOOKING CONDITIONS

- 1. To reserve a place please fill in and sign booking form and post to Kilfinane OEC along with full payment of course fees. Bookings can also be made online at www.kilfinaneoec.com. Bookings can only be confirmed on receipt of full course fees and signed booking form.
- 2. Payment can be made in the following ways; online @ <u>www.kilfinaneoec.com</u>, by phone using a credit card or by post using cheque or postal order.
- 3. Buyers who cancel the contract up to 30 days before commencement of the course receive a full refund less an administrative charge of €25 per person. Course places cancelled within 30 days of course commencement receive no refund.
- 4. Kilfinane OEC reserves the right to change/ cancel programmes where weather or other circumstances dictate or where minimum participant numbers have not been reached. Where courses are cancelled by Kilfinane OEC participants will be offered a choice of refund or an alternative course. All courses are subject to minimum course numbers.

PARTICIPATION CONDITIONS - FITNESS & MEDICAL

Participants are responsible for ensuring they have appropriate fitness and good health to participate in their chosen course. The training undertaken at Kilfinane OEC often involves strenuous physical exercise, is of an adventurous nature and contains elements of risk. Participants can be exposed to cold & wet conditions. Anyone suffering from, or ever having suffered from, any medical condition, illness or injury or who is pregnant should consult their doctor regarding the suitability of their participation. Participants with concerns should only attend following positive advice from their doctor and should make their condition known to the centre staff in confidence via their booking form and should verbally advise each Instructor working with them. Parents/ Guardians booking on behalf of children are responsible for ensuring they have appropriate fitness and good health to participate and advising us of any relevant medical information. For participants attending regularly it is your responsibility to advise us of any change in relevant information.

(For under 18's Parents/ Guardians should complete and sign this section)

Do you have any current or past medical or phy	ysical condition, previo	ous injury, or treatment i	regime that you think
may affect your participation on your chosen con	ourse or on the possible	e application of first aid /	medical treatment in
the unlikely event that you are involved in an ac	ccident?	YES/ NO	
Please give details:			

Course fees: I enclose payment of € _____ by cheque/ postal order/ cash (please do not send cash by post)

I agree to the above booking and participation conditions. I consent to being given First Aid/ Medical treatment if necessary.

Signed: _____

Date: _____