



Gloucestershire Pathfinder Project

Booking Form 9th – 16th April 2012

Student Details

Name:

Date of Birth:

Address:.....

.....Postcode:

Gender.....

Do you have any physical or learning disabilities which may require you to have additional support during the programme or have health or safety implications for other attendees? If so, please note them in a separate letter in order that we can make any necessary arrangements.

If you wish to discuss any aspects of this please contact John Beckford or Paul Silverwood on 07786 510060

I understand that my personal information may be used and records checked in the furtherance of research related to the project in which I participate.

Signature.....

Accompanying Adult Details

Name:Relationship:

Email Address:

Contact Telephone Number(s):.....

Address (If different):.....

.....Postcode:

Under 17 Drivers Pathfinder Limited

A trading subsidiary of The Under 17 Car Club Charitable Trust

Registered in England

Company No: 6281707

Accounting and taxation Centre, Unit 3, 36 Queens Road, Newbury, RG14 7NE



Details of vehicle to be used

Vehicle make and model (e.g. Land Rover):

Engine size: Vehicle registration:

Name of registered keeper of vehicle:

How did you find out about Pathfinder?

Accompanying adult.

I confirm that the details I have provided are correct and I have read and agree to the Pathfinder Driver School terms and conditions.

Signature: Date:

Please return booking form and a cheque for £170 made payable to:

Under 17 Drivers Pathfinder Limited
c/o 19 Exmoor Road, Thatcham, Berkshire, RG19 3UY