



Title:			Age/Date of Birth:						
Full Name:									
Address:									
Email:					Phone (Phone contact:			
Course Type (please circle)	2hr	1day	2day	5days	7days	Other	SUP hire	Kayak Hire	
Your Windsurfing ability: (please circle)		Novice	Start		Interme	Intermediate		Advanced	
Please briefly out	line any wir	ndsurfing ex	perience y	ou may h	nave:				
Please state the c	late(s) that	vou would l	ika ta cam	mancay	our course:				
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- A deposit of £100 is required for courses of 2 days and longer.
- For two hour courses and one day courses we recommend contacting the centre directly to arrange times and dates as to increase flexibility in relation to the wind and water conditions.
- BACs details or a Zettle link will be sent to you upon receipt of booking form/email.
- The centre will endeavour to contact you with the details provided if the staff deem the conditions to be unsafe and or unpractical for the day. We will then do our best to re arrange your activities with your consultation.

(Continued overleaf)

I confirm that I have read and understand the booking conditions. I declare that to the best of my knowledge I am not suffering from any health conditions that may effect my safety on the water. If no, please identify condition and any medication used. I can swim 50 meters and/or am I am water confident. I am happy for this information to be shared with relevant staff members concerned with my activities. Signed:___ Date: **Emergency Contact details:** Name: Relationship: **Contact Phone Number:** Parents or Guardians if under 18: Name: Address: **Contact Phone**

Please read and sign the declaration below.

Coverack Windsurfing Centre respects the privacy and security of your personal details. We will not keep your details for longer than necessary. We will use your details lawfully and for its specified purposes.

Number:

Signed:

Date: