Name of Group:

Type and purpose of Group (eg youth, school, community, religious denomination)

Has your group used the Moyallon Centre before?

Name of Group Leader:

Address:

Post Code:

Phone Number (please indicate day/eve):

Mobile (contact number during stay):

Email:

Estimated Number of Participants

Male \_\_\_\_\_\_\_\_ Female \_\_\_\_\_\_\_\_ Total \_\_\_\_\_\_\_\_

Accompanying Staff/Leaders
Male \_\_\_\_\_\_\_\_ Female \_\_\_\_\_\_\_\_ Total \_\_\_\_\_\_\_\_

Number of participants under 18 years of age (if applicable) \_\_\_\_\_\_\_\_

Does your group require bedding? Yes/No

Does your group have any special access requirements (eg use of lift) \_\_\_\_\_\_\_\_\_\_

**Booking Details**

Date of Arrival: Time:

Date of Departure: Time:

Signature of Group Leader: Date:

Please return completed form and non-refundable deposit of £200 within **2 weeks** of initial enquiry to confirm booking or your booking will be considered null and void. We also require a copy of your child protection policy and your public liability insurance.

Moyallon Centre, 117 Stramore Road, Portadown, Co Armagh, BT63 5JZ

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