



Trips/Visits Booking Form

Please book me a place on the visit to: _____ Date:

DD	MMM	YYYY

Participant

Name: U3A Membership No. if applicable:
Contact Tel No.: _____ Home
_____ Mobile

Emergency Contact

Name: U3A Membership No. if applicable:
Emergency Contact Tel No.: _____ Home
_____ Mobile

I enclose a cheque for £ made out to Ravenshead U3A Social Account

- Notes:
1. Non-U3A members are **NOT** covered by U3A insurance
 2. All monies are non-refundable unless your place can be re-sold
 3. Please return this form completed in full and your cheque for the full amount to the relevant trip organiser (see publicity) for the visit.