

GROUP BOOKING FORM 2019



MR. MRS. MISS. MS. DR. OTHER

FIRST NAME: _____ SURNAME: _____

GROUP NAME: _____

ADDRESS: _____

POSTCODE: _____

TEL NO: _____ EMAIL: _____

DATE OF TRIP: _____

Type of Group:

- Youth Group Sports Club Church Holiday Club Local Community
 Uniform (Scouts/Brownies etc) Other _____

Please confirm the number of tickets required: _____ Standard (Aged 13+)
_____ Junior (Aged 3-12) _____ Under 3's _____ Carer

Please tick your preferred payment method: Credit Card Cheque BACS

Email this completed form to groups@oakwoodthemepark.co.uk or call our friendly team on 01834 815 170 for more information.

Booking confirmation will be sent via email & post within 7 days of receiving full payment. Tickets will be available for collection from the designated collection point upon your arrival to Oakwood Theme Park.

Payment MUST be received in FULL prior to entry.

OFFICE USE ONLY

Booking received by Email / Telephone

Booking completed by: _____ Date: _____

Booking processed by: _____ Date: _____

Booking reference number: _____

Payment received by BACS / Cheque / Credit Card Date: _____

Booking confirmation sent by: _____ Date: _____

Wales' **BIGGEST** Family Adventure!