

# Ocean Youth Trust South

# Group Booking Form B4

Please return to:  
**Ocean Youth Trust South, PO BOX 203, Gosport PO12 9AZ**  
 Tel: 0845 365 6781 Fax: 0845 365 6782 Email:office@oytsouth.org

**YOUR FULLY COMPLETED BOOKING FORM, B3 SIGNED BY PARENT OR GUARDIAN, IF APPROPRIATE, MUST BE IN THE OYTSOUTH OFFICE AT LEAST 3 WEEKS BEFORE START OF THE VOYAGE**

Please use a **BLACK** pen and print clearly in BLOCK CAPITALS

## Personal Details

<b>Organisation</b>	
<b>Group Leader</b>	
<b>Address</b>	
<b>County</b>	
<b>Post Code</b>	
<b>Country</b>	
<b>Tel No. (Day)</b>	
<b>Mobile No.</b>	
<b>Email</b>	

## Details of Group

<b>Number of Berths to be reserved</b>		<b>Age Range</b>	<b>Sex</b>
		<b>from</b>	<b>to</b>
<b>Adult leaders sailing with group</b>			<b>Number</b>
			<input type="checkbox"/> M <input type="checkbox"/> F

Please give a brief outline of the likely composition of your group or nature of the work within your organisation

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## Booking

I would like to book one/all \* of the voyages below shown in order of preference

Choice	Voyage No.	Start Date	No. of nights	Finish Date	Cost
1					£
2					£
<b>Total Cost:</b>					£

## Payment

Group Booking		Date Paid
Full voyage fee	£	
Booking deposit, 10% of total cost within 21 days of reservation	£	
Balance of deposit of 15% due within further 60 days	£	
(Outstanding balance due 60 days before voyage)	£	
<b>Total balance due</b>	<b>£</b>	

**NOTE :-Please contact the office if unable to meet payment date requirements**

**PLEASE MAKE CHEQUES PAYABLE TO:- "OCEAN YOUTH TRUST SOUTH" and crossed**

This declaration must be signed by the group leader, or organiser of the group.

1. I consent to the group taking part in a voyage with Ocean Youth Trust South.
2. I will provided details of any medical, physical or other conditions which might affect the performance or safety of all applicants.
3. I agree that the group including myself will comply with the terms and conditions detailed on the back of this form, which I have read.
4. Both the group and myself will comply with the rules, regulations and instructions given to us by the Sea Staff during the voyage.
5. The group including group leaders will not be disruptive, aggressive, violent, intimidating or display antisocial behavior including bullying during the voyage and understand that any such persons not complying with OYT South regulations on board may be asked to leave the vessel at their own expense.

Signature .....

Date .....

Name in BLOCK CAPITALS .....

Position in group .....

## Please Note

**ALL MEMBERS OF THE GROUP INCLUDING GROUP LEADERS MUST COMPLETE AN INDIVIDUAL BOOKING FORM (form B3)**