Title:	Mr/Mrs/Ms	:/Miss (pleas	se circle)			ARTY
Full Name:						
Address:					RO	OKING
Postcode:						FORM
Home Tel. No:						
Mobile Tel. No:						
Email Address:						
Membership No:						
Age Range of Party:						
rige name of rarey.	_					
Date Required:					x 🖈	
Time:	From:		To			
Activity:	From:		To:			
					4	
Birthday Child's Name	:				P	
Child's Date Of Birth:					W 1	
Wet & Wild Party:	Half Pool:		Whole Pool:			
Meal Choice:	Hot Menu		Picnic Boxes		, p	
	Deluxe Mei					
Hot Menu:	Meal Choic Chicken Nu		um of 2 per part Sausage	Σy □		
	Fish Finger		Pasta		•	
Picnic Boxes:			kimum of 2 per j	party	100	
	Ham		Cheese			
	Jam					
Dessert: (Hot & Picnic Boxes Only	One choice	e per party	Fruit Pot			· Committee
How did you hear abo	Ice Cream	Recomm				
Website	out us?	Mailshot				1
Facebook		12.101.00				
School Leaflet Drop			Signature:			
Attended a previous p	arty 🗆		Signature.			
			Date:			
		N.B. Ple			activity is due in a	
			Non-retun	laable if bookii	ng is changed or co	incelled

We take your privacy seriously and will only use your personal data to provide the services requested. However, on occasion we would like to send you marketing offers and information. If you consent to this, please tick the boxes below to indicate your communication preferences: I would like to be kept up-to-date with all Junction related promotions/events and opportunities: by email by post

I would like to be kept up-to-date in regards to promotions/events and opportunities linked to YMCA Bournemouth (which my use of The Junction supports): by email 

by post

We will not pass your details to third parties and will delete your data within two years unless you request otherwise. You can withdraw consent for our holding of your data at any time by contacting info@thejunctionbroadstone.co.uk Please see our Privacy Notice at Reception or on our website for full details.