**Booking Form**

Please fill in and return to [youth@matthewproject.org](mailto:youth@matthewproject.org)

|  |  |  |  |
| --- | --- | --- | --- |
| Contact Name: |  | Position Held: |  |
| Organisation: |  | | |
| Address: |  | | |
| Telephone: |  | Email: |  |

**For invoicing purposes please provide the following details if different to above:**

|  |  |  |  |
| --- | --- | --- | --- |
| Contact Name: |  | Position Held: |  |
| Address: |  | | |
| Telephone: |  | Email: |  |

**Please indicate below the number of each session you require:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Education session (1E)  **Story of Matthew (yr 6)**  Cost: £130 per session |  | Education session (2E)  **Drugs & alcohol what are they and how do they affect me?**  Cost: £130 per session |  | Education session (3E)  **Safer Night Out Planning**  Cost: £130 per session |  |
| Programme (1P)  **Covid-19 - Navigating the new normal**  Cost: £850 per programme |  | Programme (2P)  **Call the shots**  Cost: £850 per programme |  | Assembly\*  \*Free with a purchased session delivered on the same day |  |

|  |
| --- |
| Additional Information: |

|  |  |  |  |
| --- | --- | --- | --- |
| Key Stage / Age of Group |  | Number Attending  per session: |  |
| Additional Information: | | | |

|  |  |
| --- | --- |
| Possible dates: |  |
| Times of Session(s) |  |
| Approx. length of session(s) |  |
| *Whilst we are unable to guarantee specific dates, we will do our best to accommodate your request.* | |

Please ensure your Covid-19 Risk Assessment is attached to this booking. We are unable to proceed your booking until we have received this.

|  |  |  |
| --- | --- | --- |
| Covid-19 Risk Assessment attached: | Yes | No |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you require staff to wear PPE? | Yes | No |  |  |
| Additional Covid-19 Information:  Please can you include here any specific instructions for our staff when onsite. | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Print name: |  | Date: |  |

**FOR OFFICE USE ONLY**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Covid-19 Risk Assessment attached: | Yes | No | Session booked: | Yes | No (If no, why?) |

|  |  |
| --- | --- |
| Date/s session/s: |  |
| Agreement sent: |  |
| Invoice info: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Session Type** | **Cost per session** | **Number of sessions/programmes** | **Total cost** | **Delivery dates** |
| 1E | £130 |  |  |  |
| 2E | £130 |  |  |  |
| 3E | £130 |  |  |  |
| 1P | £850 |  |  |  |
| 1P | £850 |  |  |  |
| Assembly | Free with a purchased session delivered on the same day. |  |  |  |