



LEADEN HALL

Travel & Transport Booking Form

70 The Close, Salisbury, Wiltshire, SP1 2EP

01722 334700

admin@leaden-hall.com

I WOULD LIKE TO BOOK THE FOLLOWING GODOLPHIN BUS ROUTE FOR THE AUTUMN 2011 TERM:

- G1 Andover
- G2 Fordingbridge
- G3 Romsey
- G4 Winchester

** The Leaden Hall feeder bus meets at Godolphin – PLEASE FILL IN BOTH PAGES IF YOU REQUIRE ONWARD TRANSPORT TO LEADEN HALL (ie LH4 bus)*

From: _____ Pick up point

On: MON / TUES / WED / THURS / FRI or 5 DAYS A WEEK

Please circle required days

Number of seats required _____

Requests to use any of the Godolphin buses will be forwarded on to Godolphin. We suggest that any relevant medical or special needs information is passed on to Godolphin too. You will be charged directly by Godolphin for actual usage. Please check the Godolphin website www.godolphin.org for their term dates and announcements in the event of bad weather.

Child's Name: _____

Date of Birth: _____

Parent's Name _____

Address: _____

Post Code: _____

Telephone Number: _____

Mobile Number: _____

Email address: _____

I give permission for my name, address, email and telephone number and my daughter's name and date of birth to be given to Godolphin.

Signed: _____

I WOULD LIKE TO BOOK THE FOLLOWING LEADEN HALL BUS ROUTE FOR THE AUTUMN 2011 TERM:

- LH1 - Beehive
- LH2 - Codford
- LH3 - Tisbury
- LH4 - Feeder bus (from Godolphin to Leaden Hall)

From: _____ Pick up point

On MON / TUES / WED / THURS / FRI or 5 DAYS A WEEK

Please circle required days

This form will be sent to you termly or you may opt to select your bus route for the whole year by ticking here

Please inform us if you no longer require the bus service.

Child's Name: _____ *Please complete one form per child.*

Date of Birth: _____

Parent's Name _____

Address: _____

Post Code: _____

Telephone Number: _____

Mobile Number: _____

Email address: _____