

# FIVE RIVERS FESTIVAL: RIVER FLOAT

## 27 MAY 2019

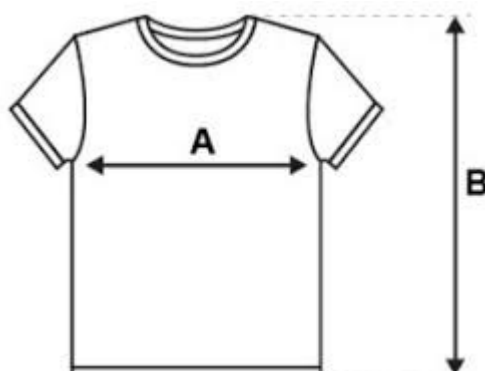
### Multiple Booking Form (max 8)

Please use the form below to record the information required to confirm the reservation you have made on the website.

Please ensure that you complete full details for ALL in your group on the next page and ensure that all participants (or a responsible adult if under 16) sign the final page, returning the information either by email or post as per the options given. We can then ensure that your booking is confirmed and that you can enjoy a float down the river together.

To help you choose the right Tech shirt size (which you can pick up at point of registration on the day), please see the following table:

	Approx. 12 Years	Approx. 16 Years	Small	Medium	Large	X Large	XX Large	XXX Large
<b>WIDTH (A)</b>	43cm	47cm	48cm	51cm	54cm	57cm	60cm	63cm
<b>HEIGHT (B)</b>	60cm	65cm	69cm	71cm	72cm	73cm	74cm	75cm



<b>Participant 1</b>	<b>Participant 2</b>
Name: Age @ 27/5/19: Resp Adult (if <16): Competent Swimmer: YES / NO Email: Phone: <b>T-shirt size: 12 / 16 / S / M / L / XL / XXL / XXXL</b> Medical Conditions/Disabilities/Allergies YES / NO	Name: Age @ 27/5/19: Resp Adult (if <16): Competent Swimmer: YES / NO Email: Phone: <b>T-shirt size: 12 / 16 / S / M / L / XL / XXL / XXXL</b> Medical Conditions/Disabilities/Allergies YES / NO
<b>Participant 3</b>	<b>Participant 4</b>
Name: Age @ 27/5/19: Resp Adult (if <16): Competent Swimmer: YES / NO Email: Phone: <b>T-shirt size: 12 / 16 / S / M / L / XL / XXL / XXXL</b> Medical Conditions/Disabilities/Allergies YES / NO	Name: Age @ 27/5/19: Resp Adult (if <16): Competent Swimmer: YES / NO Email: Phone: <b>T-shirt size: 12 / 16 / S / M / L / XL / XXL / XXXL</b> Medical Conditions/Disabilities/Allergies YES / NO
<b>Participant 5</b>	<b>Participant 6</b>
Name: Age @ 27/5/19: Resp Adult (if <16): Competent Swimmer: YES / NO Email: Phone: <b>T-shirt size: 12 / 16 / S / M / L / XL / XXL / XXXL</b> Medical Conditions/Disabilities/Allergies YES / NO	Name: Age @ 27/5/19: Resp Adult (if <16): Competent Swimmer: YES / NO Email: Phone: <b>T-shirt size: 12 / 16 / S / M / L / XL / XXL / XXXL</b> Medical Conditions/Disabilities/Allergies YES / NO
<b>Participant 7</b>	<b>Participant 8</b>
Name: Age @ 27/5/19: Resp Adult (if <16): Competent Swimmer: YES / NO Email: Phone: <b>T-shirt size: 12 / 16 / S / M / L / XL / XXL / XXXL</b> Medical Conditions/Disabilities/Allergies YES / NO	Name: Age @ 27/5/19: Resp Adult (if <16): Competent Swimmer: YES / NO Email: Phone: <b>T-shirt size: 12 / 16 / S / M / L / XL / XXL / XXXL</b> Medical Conditions/Disabilities/Allergies YES / NO

**Please provide details any medical conditions/disabilities and allergies:**

Participant	Relevant Details of Medical Conditions/Disabilities & Allergies

## Declaration

We confirm that we have:

- Read the General Festival Terms & Conditions
- Read the Specific River Float Terms & Conditions

**Name 1:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Participant/Responsible Adult)

**Name 2:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Participant/Responsible Adult)

**Name 3:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Participant/Responsible Adult)

**Name 4:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Participant/Responsible Adult)

**Name 5:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Participant/Responsible Adult)

**Name 6:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Participant/Responsible Adult)

**Name 7:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Participant/Responsible Adult)

**Name 8:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Participant/Responsible Adult)

Please send the completed forms ASAP (but by 27<sup>th</sup> April 2019 at the latest).

BY E-MAIL to: [rotary5rf@gmail.com](mailto:rotary5rf@gmail.com)

BY POST to: **Five Rivers Festival (River Float), c/o Salisbury BID, A2Z House  
24-26 Milford Street, Salisbury SP1 2AP**

**Many thanks for taking part**