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| **Reservation Form** |

If you are jumping with others please attach a list of group members and tick here

#### Please note each individual jumper must have their own reservation form

*(You may photocopy this form but it must be both sides on one sheet of paper)*

Please complete this form (in BLOCK CAPITALS and black ink) and return it to the address below as soon as possible and certainly no later than the latest booking date - **Friday 02 December**. Please also provide your £70 booking deposit cheque (payable to ‘Skyline’) or credit card details (see below).

On **Saturday 11 March** at the **Brackley airfield** a special Tandem parachuting event is taking place on behalf of Age UK Solihull. Please return this form to the address below by **Friday 02 December** if you would like to take part.

If you are not able to jump on the weekend date mentioned above please contact Skyline to discuss the possibility of arranging an alternative date for your jump (020 7424 5522).

How did you find out about the jump? If from a newspaper,

website, company or charity newsletter please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please specify as this will be our primary source of contact)

Tel No. (Day) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel No. (Evening) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Male/Female \_\_\_\_\_\_\_\_\_\_ | Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_ | Height \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Weight \_\_\_\_\_\_\_\_\_\_\_\_\_ |

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|  | I enclose a cheque payable to ‘Skyline’ |
|  | Please Charge my Visa / Mastercard / Delta / Switch with the following amount £ \_\_\_\_\_\_\_\_\_ |

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| Card Number | | | | | | | | | | | | | | | | | | | | | Valid From | | Expiry Date | 3 digit code  (back of card) | Issue No  (switch only) |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | \_\_\_\_ / \_\_\_\_ | \_\_\_\_ / \_\_\_\_ | \_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ |

**IMPORTANT:** I confirm that I have read the Booking Terms and Conditions, Medical Restrictions, Insurance and Important Notice overleaf (if these are not listed then please call 020 7424 5522 to request a copy) and I understand and agree to be bound to those terms and conditions and to comply fully with the same.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Tick here if you do not wish to receive details of other offers from either the charity or other organisations |

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|  | **Please send this form**  **and your deposit to:** | **Age UK Solihull** C/o Skyline 31 Corsica Street London N5 1JT |  |

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| **For office use only**  Cheque Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Cheque Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Cheque Date \_\_\_\_\_\_\_\_\_\_\_\_\_ | **AGEUKSOL 10BBT** |

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|  | Please read all sections of this page carefully **before signing the declaration below** | Tandem |

**Booking Terms and Conditions**

1. In order for you to recover reimbursement of the booking deposit and the cost of the training and the jump, you must raise the minimum sponsorship level as detailed in the ‘Paying Your Sponsorship Money’ page enclosed in this pack.
2. The cost for the training and the jump must be paid on the day of training and this payment is totally non-refundable even if you do not jump for any reason.
3. Should the weather be unsuitable for jumping on the day it will be up to you to return to the parachute centre on another occasion(s) if necessary to complete your jump.
4. All booking deposits are completely non-refundable. However, the standard booking deposit is valid for twelve months from the date of booking and should you be unable to complete your jump due to inclement weather alternative arrangements will be made. This fee is payable to Skyline Promotions Ltd and covers various costs including without limitation assisting you to find an airfield where you may carry out your jump .
5. A fee of £50 will be charged for all cancellations or changes of jump date. This is in addition to the standard booking deposit and is not in any way deductible from any sponsorship money raised for a charity.
6. Skyline Promotions Ltd in consideration of the payment of the booking deposit will take all reasonable steps to arrange your jump at your nearest available parachute centre but since parachuting is a very popular sport, we may be forced to offer you an alternative due to lack of availability at some centres. Skyline Promotions Ltd acts as your agent in arranging for your jump and not as the agent for the parachute centre. Skyline Promotions Ltd use only those parachute centres which are affiliated to the British Parachute Association as the National Governing Body of the sport. Accordingly, no representations or warranties of any kind are made by Skyline Promotions Ltd as to the suitability, capability, quality of training or operation of any parachute centre. Any queries or complaints with regards to these aspects should be referred to the parachute centre concerned.

**Medical Restrictions**

For a tandem skydive you must be at least 16 years old and must weigh under 15 stone with your weight in proportion to your height. Please note some centres have lower weight limits - please contact us for details. The principal medical restrictions are diabetes, epilepsy, fits, recurrent blackouts, heart or lung disease, mental illness and some cases of asthma but if you are in any doubt please contact us for further information. You will be required to sign a medical form before your jump declaring your fitness to take part - this will be sent to you upon receipt of your reservation form but is also available on request. Those under the age of 18 will need the medical form signed by a parent or guardian; those aged 40 and over, or those with a medical condition, will need it signed by their doctor.

**Insurance**

On payment to the parachute centre of the fee for the training and the jump, all jumpers are covered by the British Parachute Association Liability Insurance Policy up to £2 million for liability to Third Parties. Please note that this does not cover you or your dependants for personal injury including death. You are therefore strongly recommended to take out your own insurance cover for personal accident benefits to whatever level you consider appropriate. You can do this either in conjunction with your own insurance broker or you may call us on the number below and we will send you a Personal Insurance Form. If in any doubt you should seek independent advice.

**IMPORTANT NOTICE**

Parachuting is an adventure sport and participation in such sports necessarily involves a risk of injury or death regardless of the standard of training, supervision and equipment employed. I voluntarily accept all the risks inherent in the sport and I agree for myself and my personal representatives to indemnify and hold harmless Skyline Promotions Ltd against any claim or claims whether on my own account or from third parties arising out of any accident or incident resulting in any loss or damage (including bodily injury and death).

***I confirm I have read all the above sections marked Booking Terms and Conditions, Medical Restrictions, Insurance and Important Notice, and I understand and agree to be bound to those terms and conditions and to comply fully with the same.***

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| **Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Date \_\_\_\_\_\_\_\_\_\_\_** |