



KILLOWEN, SHANNAGHMORE & BINNIAN OUTDOOR EDUCATION CENTRES

BOOKING REQUEST FORM

Has your school or group ever used the SELB Outdoor Education Centres before? Yes No
If yes, please state when? _____

Please tick the centre you wish to use.

VENUE: Killowen Shannagh-More Binnian Shannagh-More Campsite

COURSE DATES: (Preference 1) _____ DAYS OF WEEK: _____
(Preference 2) _____
(Preference 3) _____

NAME OF SCHOOL/GROUP: _____

ADDRESS: _____

Post Code _____

PHONE: (Daytime) _____ (Eve) _____ FAX: _____

ACCOMPANYING TEACHER/LEADER IN CHARGE: _____

ADDITIONAL TEACHERS/LEADERS: _____

CONTACT PERSON: _____ CONTACT PHONE: _____

Please indicate the category that most adequately describes your group.

SELB Primary School SELB Secondary School SELB Registered Youth Organisation
SELB Special School Other

If other please describe your organisation.

Please state the electoral ward(s) that the majority of your group come from. _____/_____

Please select the District Council Area in which your organisation is based.

Armagh Banbridge Cookstown
Craigavon Dungannon Newry and Mourne

NUMBERS IN GROUP: Students _____ (Total) _____ (Male) _____ (Female)
Leaders _____ (Total) _____ (Male) _____ (Female)

Please state age range of young people participating in group. _____ years to _____ years

Please indicate the type of experience you require below.

Residential Camping (S/More) Day Group Field Studies
Catered Self Catering Instructed Activities Self-Programming
Partly Instructed/Partly Self-Programming Environmental Studies Day Group at Killowen

The main purposes of the residential/visit are: _____

Special consideration may be given to groups that have students/members experiencing marginalisation or social exclusion, in particular those in Section 75 groupings. If this applies to your school/group please provide evidence below.

DEPOSIT:

Enclosed £ _____ as a deposit for _____ persons at £ _____ per person. Receipt No: _____
Journal Transfer or LMS Transfer <input type="checkbox"/> Reference No: _____
SELB Funding (please specify) C/Community <input type="checkbox"/> Training <input type="checkbox"/> Other <input type="checkbox"/>

I CONFIRM THAT OUR ORGANISATION HAS A CHILD PROTECTION POLICY Yes No

Signed: _____ Teacher/Youth Leader

Approved: _____ Principal/Youth Leader-in-Charge

Completed forms : If using Shannagh-More OEC, Campsite or Binnian
To
Shannagh-More Outdoor Education Centre
The Ballagh, Kilkeel Road
Newcastle, Co Down
BT33 0LA
Tel: (028) 4372 3841 / 4372 2341
Fax: (028) 4372 6602
Email: shannaghmore@selb.org

If using Killowen OEC
To
Killowen Outdoor Education Centre
Killowen Point
Rostrevor
Newry, Co Down
BT34 3AN
Tel: 028 4173 8297
Fax: 028 4173 8167
E-mail: killowen@selb.org