

on

Gullane Multi-Sports Pitch Extended Let Application Form

Please complete all shaded areas and email this form to bookings @gullanesportsdevelopmenttrust.org at least 28 days prior to preferred start date.

NAME OF ORGANISATION					٦
NAME, DESIGNATION & ADDRESS	T INVOIC	E TO BE	SENT TO (if different to applicant)		
	7 7 7 1 2 1 2 1 3 7 1 1		21022	(ii amoron to approach)	
CONTACT NUMBER(S)					_
DAY	EVENING				
			transfer for	Cash/Cheque for Block/Session	
Email			Session lete option	n NOT required)	
		, ,			
NATURE OF LET					
PERIOD OF LET: (Maximum	1 year up to	30 June 2016)			
AREA(S)		TIME(S) from to	DAY	(S) and DATE(S) REQUIRED	Total number of lets
All-weather pitch		10111 10			Oricis
All-weather pitch					
All-weather pitch					
All-weather pitch					
PLEASE SUPPLY DATE(S) W	HEN FACILIT	TY WILL NOT E	E REQU	JIRED e.g. holidays etc	•
NB: The Trust aims to maximise t times to accommodate this aim. A					
clearly if several user groups requ groups to work with us towards th		oooking time som	e negotia	ation will need to be facilitated. W	e ask all user
I apply for the use of facilities a		ove.			
NAME OF APPLICANT					
DESIGNATION					
DATE					
FOR TRUST USE ONLY Confirmation Sent	YES NO				
Cancelled by	ILO INU				
Invoice raised Invoice paid by	YES NO				