



**STAVELEY TOWN COUNCIL COMMUNITY COACH TRIP 2010**  
**CLEETHORPES**  
**APPLICATION FORM**

**To be returned to: Reception, Staveley Town Council, Staveley Hall,**  
**Staveley Hall Drive, Staveley, Chesterfield S43 3TN**  
**BY FRIDAY 6TH AUGUST 2010**

**Names of Applicants**

**Age if under 18**

- |    |       |       |
|----|-------|-------|
| 1. | ..... | ..... |
| 2. | ..... | ..... |
| 3. | ..... | ..... |
| 4. | ..... | ..... |
| 5. | ..... | ..... |
| 6. | ..... | ..... |

**Address:** .....

.....**Post Code** .....

**Contact Telephone No.(s)** .....

**Email Address** .....

**Any Special Needs/Medical Condition** .....

**PLEASE NOTE:**

- \* *No persons under the age of 18 will be accepted unless accompanied by an adult.*
- \* *Only open to Staveley Town Council Residents: Checks will be carried out.*
- \* *Publicity photographs may be taken by Staveley Town Council during the course of the Community Coach Trip.*
- \* *In the event that the Community Coach Trip is oversubscribed places will be selected proportionate to wards at random by an independent individual.*
- \* *Full payment (£3.00 per adult £2.00 per child) in CASH must be made within 7 days of notification that you have a seat. If full payment is not received your seat(s) will be reallocated.*

**FOR OFFICE USE ONLY:**

**DATE RECEIVED:** ..... **SELECTED:** YES NO

**On Electoral Register:** YES NO

**NOTIFIED** .....

**PAYMENT RECEIVED** .....