



ADVENTURE REHAB

Putting lives back on track

2011 Booking Form

Please use this form to book and pay for ADVENTURE REHAB courses – course codes relate to courses as detailed at www.adventurerehab.co.uk or in our brochure.

Any queries please call us on 01626 824590

Course (Please circle)	Course code and Date	Cost
Initial 3 Day Assessment	A11AS 17-19 Jan 2011	£875.00
	B11AS 21-23 Mar 2011	
	C11AS 23-25 May 2011	
	D11AS 19-21 Sep 2011	
	E11AS 14-16 Nov 2011	
Rehabilitation Programme (5 weeks) (3 full 5 week courses will be run in 2011 the week 1's start -)	A1101RP start- 7-11 Feb 2011	£12,500 (5 fully inclusive residential weeks)
	B 1101RP start- 2-6 May 2011	
	C1101RP start – 26-30 Sep 2011	
Individual rehabilitation weeks	Exceptionally and by arrangement	£2500.00 (per week)
Family & Carers Support and Education package (join the last 2 days of week 1 and week 3 of the full rehabilitation programme)	A1101FC 10-11 Feb 2011	£400.00
	B1101FC 5-6 May 2011	
	C1101FC 29-30 Sep 2011	
	A1103FC 7-8 Apr 2011	
	B1103FC 14-15 Jul 2011	
	C1103FC 1-2 Dec 2011	
Family multi-activity weekend	A11FW 25-27 Mar 2011	£250.00 (2 adults +2 Children or £125.00 per person)
	B11FW 01-03 Jul 2011	
	C11FW 21-23 Oct 2011	
Carer's respite weekend	A11CRW 11-13 Mar 2011	£350.00
	B11CRW 22-24 Jul 2011	
	C11CRW 28-30 Oct 2011	
Carer's respite break	A11CRB 14-18 Mar 2011	£1700.00
	B11CRB 12-16 Sep 2011	
AR Wilderness challenge team event	22-24 Apr 2011	
	30 Sep-02 Oct 2011	

Name
Date of birth
Outline of injury
Date of injury and most recent surgery
Brief clinical, family and employment history
Address
Telephone numbers Mobile Home
Contact email
Referrers details name email contact numbers
PAYMENT

I enclose a Course fee of _____ for course code _____

Carers or family members are accommodated at cost.

Please indicate here if a carer or family member would like to attend and we will contact you to discuss further.

Delete as appropriate:

Payment by cheque is attached.

Please send me an invoice. The billing address is:

Terms of payment: 20 days prior to commencement of course, or upon booking, whichever is the later.

BACS: Adventure Rehab Ltd, Account 50373591, Sort Code 20 30 47

Please quote reference course code */(name of client)*

We are configured to receive International payments please contact us by email for details

Any other information you think might be relevant

Signed _____ **Date** _____