

Bracknell Town Council

GREAT HOLLANDS BALL COURT BOOKING FORM 2024 / 25

NAME OF CLUB								
TEAM NAME								
DAY REQUIRED Please circle your requirement	MON	TUE	WED	THU		FRI	SAT	SUN
FREQUENCY OF PLAY Please circle your requirement	EVERY WEEK				ALTERNATE WEEKS			
DATES REQUIRED	START DATE:				END DATE:			
Please advise of any dates to	he Ball C	ourt is <u>NOT</u>	required:					
TIME REQUIRED	START TIME:				END TIME:			
CHANGING ROOMS Please circle your requirement	YES				NO			
CONTACT NAME								
ADDRESS								
EMAIL (Please include an email address that can be used to contact the team regarding any pitch closures during the season)								
TELEPHONE	MOBILE				LANDLINE			
SIGNED								
DATED								

Please email completed form by 30th June 2024 to enquiries@bracknelltowncouncil.gov.uk