

## DETAILS

Minimum age is 16 years old. Please complete in BLOCK CAPITALS

Name of participant(s): \_\_\_\_\_ Date of birth: / /  
 \_\_\_\_\_ Date of birth: / /

Name of someone we can contact on the day in case of emergencies: \_\_\_\_\_ Tel/Mobile: \_\_\_\_\_

To the best of your knowledge is the person taking part fit and healthy? Yes  No

If "No", please give details: \_\_\_\_\_

Please provide details of any allergies or medical conditions we may need to be aware of: \_\_\_\_\_

Please provide details of any special needs we may need to be aware of: \_\_\_\_\_

Please give your 3 preferred dates: 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_  
 (Please allow a minimum of three weeks for your visit to be arranged.)

Confirmation to be sent via: Email  Post  Please give details below

Name & address of person making the booking: \_\_\_\_\_

Email: \_\_\_\_\_ Tel/Mobile: \_\_\_\_\_

Please indicate if this is a surprise gift: Yes  No

## PAYMENT

Payment can be made by Visa, Mastercard, Visa Debit, Maestro or cheque. Please make cheques payable to Flamingo Land Ltd and allow 7-10 working days for processing.

Total Cost (£200 per person): £ \_\_\_\_\_

I wish to pay via: (tick box) Visa  Mastercard  Visa Debit  Maestro  Cheque

If you would prefer to use your credit or debit card, please provide your name and a contact telephone number below. One of our team will call you directly to take payment.

Name: \_\_\_\_\_ Tel/Mobile: \_\_\_\_\_

## HEALTH & SAFETY

All farm and zoo animals naturally carry a range of diseases, some of which can also affect humans. These diseases are known as zoonoses and during your work with animals your health may be at risk from them. Although some of these diseases are not common in Great Britain, good hygiene practices will protect against them. Remember, do cover all cuts and grazes and wash your hands and arms before eating, drinking or smoking after contacting animals, or working in enclosures. Please ensure you use all PPE (Personal Protective Equipment) provided by the keeping staff e.g. gloves etc, and practice good personal hygiene.

Flamingo Land will not accept responsibility for any person disregarding health & safety guidelines or neglecting to follow safe working practice instruction by its trained Keeping staff whilst in the boundaries of the zoo.

Whilst I am a guest of Flamingo Land Ltd I agree to abide by the conditions and safe working practices of the Keeping department and in the event I contravene these conditions I will not hold Flamingo Land Ltd nor its Directors, employees or agents responsible for any loss or injury sustained by or to me during my visit.

Participant(s) signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

Accompanying adult signature: (if applicable) \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE RETURN YOUR COMPLETED FORM TO:

Zoo Booking Office, Flamingo Land, Kirby Misperton,  
 Malton, North Yorkshire YO17 6UX