**National Festival of  
Youth Theatre 2019**

**1-Day Group Booking Form**

Please complete this form and email it to [vikki@ytas.org.uk](mailto:vikki@ytas.org.uk) by **Friday 7 June 2019**

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**Contact Details**

|  |  |
| --- | --- |
| **Group name:** |  |
| **Lead contact name:** |  |
| **Email::** |  |
| **phone:** |  |

|  |  |  |
| --- | --- | --- |
| **Your Booking** | **Quantity** | **£** |
| **NFYT Bite Size (£10 per person)** |  | £ |
| **NFYT Taster (£30 per person)** |  | £ |
| **FREE places**  **(1 free group leader per 10 young people)** |  | £0.00 |
| **Total:** | | **£** |

|  |  |
| --- | --- |
| **Payment** | **Please select** |
| **Please invoice me for the total booking fee** |  |
| **I enclose a cheque for the total booking fee** |  |

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| |  | | --- | | **Booking Conditions** | | **Please confirm** |
| **I confirm that my group will be accompanied at NFYT 2019 by at least one group leader. He/she is over 18 and meets the requirements of the PVG (Scotland) Act 2007.** |  |

**We look forward to welcoming you to the National Festival of Youth Theatre 2019!**