| Name | |
|-----------------|--|
| Name of Company | |
| Address | |
| | |
| | |
| | |
| Telephone | |
| Email | |

| How Many passes would you | |
|---|--|
| like? | |
| Names and car registrations for | |
| people using the passes? | |
| | |
| | |
| Please continue overleaf if | |
| necessary | |
| | |
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| | |
| | |
| Which day will you be pooding | |
| Which day will you be needing your passes for? | |
| Which Roads and times would | |
| you need to use passes? | |
| | |
| Please continue overleaf if | |
| necessary | |
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| | |
| | |

| Signed | Date | |
|--------|------|--|
| | | |

Please complete and e-mail back to <u>info@activitywalesevents.com</u>. Please see the road closures leaflet to know road closure times.

Please note it is down to the discretion of Activity Wales Events to distribute passes.