

Wellbeing Journeys

@Fernbank House

Please send your completed booking form to: info@wellbeing-journeys.com

And payment to PayPal.com: info@wellbeing-journeys.com

Submission of the booking form is agreement to our terms & conditions of sale, which can be found on our website.

Bespoke Programmes

Session

Adventure Therapy

Peace of Wilderness

Activity

Paddleboarding

Forest Bathing

Canoeing

Sole 2 Soul

Kayaking

Campfire Conversations

Explorers Journey

Family Chill

Climber

Foodie Family

Vitamin Me

Vitamin Sea

Eco—Orienteering

Eco—Art

Duration

Half

£60

Full Day

£90

1 — 2 — 1

£250

Group booking

Over 6 - 10%

Over 12 - 15%

Session

Activity

Duration

Cost / Volume

Set Programmes 2023

Adventure Therapy

Page 1

Activity	Dates	Half AM	Half PM	Full Day	£	Number of Participants
Paddleboarding	May 29th				60	
	June 25th				60	
	July 1st				90	
Canoeing	April 22nd				60	
	June 30th				60	
	July 2nd				90	
Kayaking	May 29th				60	
	July 16th				60	
	July 23rd				60	
Climber	April 25th				60	
	May 1st				60	
	June 16th				90	
Explorers Journey	May 12th				90	
	June 2nd				90	
	July 30th				90	

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Peace Of Wilderness

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Activity	Dates	Half AM	Half PM	Evening	£	Number of Participants
Forest Bathing	May 13th				60	
	June 18th				60	
	July 8th				60	
Paddleboard Bathing	May 20th				60	
	June 24th				60	
	July 9th				60	
Canoe Bathing	May 21st				60	
	July 21st				60	
	July 28th				60	
Sole 2 Soul	April 23rd				60	
	May 14th				60	
	June 17th				60	
Campfire Conversations	April 29th				60	
	May 19th				60	
	June 16th				60	

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Set Programmes 2023

Peace Of Wilderness

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Activity	Dates	Half AM	Half PM	Evening	£	No of Participants
Family Chill	July 15th				60	
	July 22nd				60	
	July 29th				60	
Foodie Families	June 30th				50	
	July 15th				60	
	July 22nd				60	

Booking as a group? Then why not create your own bespoke programme with us:

Session

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Activity

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Duration

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Preferred Date

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Contact Details 2023

Contact Details

Name:	
Address:	
Email:	
Phone Number:	
Emergency Contact phone number:	

Additional information box if required:

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Wider Information

DOB:	
State all medical / physical / mental conditions, illness- es or allergies relevant to your partaking in the activity. Please include medica- tion or preventa- tive measures you may need to take on session.	
Confidence in water:	
Wetsuit size eg: xs, s, m , l, xl, xxl	
Prior experience of the activity:	
Aspirations for the session:	
Print Name:	
Sign or e-sign:	

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