Play Service Enquiry Form [Office use only Ref No: ……]

Your Name:		
Address:		
Phone:		
Email :		
Your Job Title:		
If your enquiry is From an organisation Please state which one:		**Name of JAT if applicable**
Contact details for the Organisation :		

Please state your enquiry, idea or request. If you have an idea as to times/dates/places please make sure you include these:

Are any other agencies or partners involved, if so which?

Date: **Signed:**

Please return to: Neil McCarthy Principal Play Officer, Notts Play Service, Unit 1 Stephenson Court, Stephenson Way, Brunel Drive, Newark, Notts, NG24 2TQ Neil.mccarthy@nottscc.gov.uk