



SUMMARY COURT
(Licensing)
FALKLAND ISLANDS

Application for Camp Exemption Order

Sections 66(5A) Licensing Ordinance 1994

Full name of applicant			
Name of licensee			
Name of licensed premises			
Address of licensed premises			
Days of the week & times for which certificate is sought	Monday		
	Tuesday		
	Wednesday		
	Thursday		
	Friday		
	Saturday		
	Sunday		
Is the area to be covered by the camp exemption order a suitable environment for under 18 year olds?	Yes		No
Will non-alcoholic beverages be available?	Yes		No
Will meals be available?	Yes		No

Declaration

I declare that the particulars given about are true and that I am the holder of a club registration certificate.

I apply for a camp exemption order as specified above.

Signed:

Dated: