

Headquarters Hampshire & Isle of Wight Wing
 Air Training Corps, Newburgh House, Newburgh Street,
 Winchester, Hants SO23 8UY
 Tel: 01962 890728 (Main Office)
 Tel: 01962 890704 (Wg Ad O)
 Fax: 01962 890545
 E-mail: whq-hiowaa1@atc.raf.mod.uk



Wing Headquarters
 HIOW Wing

Our Reference: HW/3/10/Trng

Date:

WING ORGANISED COURSE/ACTIVITY FOR WHICH AUTHORITY IS REQUESTED

1. The Wing intends to hold a collective course or activity, involving the following Sqns & D/Fs as follows:

- a. Brief details of course/activity
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- b. Date:
- c. Day:
- d. Place:
- e. Sqns / D/Fs attending.
- f. Number of cadets expected to attend:
- f. Number of adults attending:
- g. Programme: A programme is attached.
- h. H&S RA's (iaw ACP 5) submitted. **YES / NO***

- 2. Pay is requested for adults.*
- 3. Authority is requested to hold this course/activity.

Signed

Name Appt *Delete if not applicable

From: HQ HIOW Wing

To:

WING ORGANISED COURSE/ACTIVITY

- 1. Authority is/is not granted for the above named Sqns to hold the course/activity referred to in HW/3/10/Trng dated H&S RA's have been submitted and are acceptable
- 2. Pay will be admissible for adults.

Date: Signed:

Sqn Ldr
 Wing Ad O
 For OC Wing