

Living the Life of Jesus through our worship **Booking Form**

(please complete, and return this page to the Tutorial Office along with your **£30** per person deposit. We are unable to take bookings over the phone, if you are making a card payment we will contact you for card details once we have received your booking form)

Contact Information

Name: _____
(please include your preferred name and title)

Tel/Mob: _____

E-mail: _____

Address: _____

Booking (PRICES INCLUDE ACCOMMODATION, MEALS & COURSE)

Please indicate with a tick which your preferences are below. If you are booking for a group of people, please elaborate in the 'Other Requirements' section below.

I wish to book as:

- A participant in a single room: £ 125 Two participants sharing a double room: £ 250
- Non Resident Day Delegate: £ 43 per person

If you are coming as a couple, or are willing to share with a friend (double bed), please name them here:

Please tick which course you wish to attend

- Mon 13th–Wed 15th August 2018 Wed 15th–Fri 17th August 2018
- Wed 5th–Fri 7th September 2018 Fri 7th–Sun 9th September 2018

Special Meal Requirements

We can accommodate dietary needs and requirements, but as our kitchen cooks 'to order' we need to know in advance. Please do let us know if you have any special requirements, needs or have any food allergies below :

Other Requirements

Please help us to make your visit more comfortable by listing any special requirements we should be aware of e.g. accessibility needs.

Payment

I confirm that I wish to make the booking as set out in this booking form and enclose a deposit of £30 per participant. Where a reference is needed while making a payment please use reference: **Living the life of Jesus**

- I enclose payment of £ _____ - cheques should be payable to Westminster College

OR

- BACS payment to **Sort Code: 30-91-56 - Account No: 02076747** Charge to my Ministers EM allowance
- Please contact me so I can pay securely over the phone. Charge to my Lay Preachers allowance

Cancellation

All refunds will be at the discretion of Westminster College.

Signed: _____

Name (please print): _____

Date: _____

Please return via post to:

Tutorial Office, Westminster College,
Madingley Road, Cambridge CB3 0AA

For queries, contact us via:

admin@westminster.cam.ac.uk / 01223 33 06 32