

PERSONAL DETAILS

Name :

Address :

Phone :

Email :

On Facebook :

Yes

No

Facebook Name : (as above or other)

Allergies :

Medical Conditions : *

Medication : * (all medical information will be treated in the strictest of confidence and is required only in the event of an emergency)

Special Dietary Requirements :

NEXT OF KIN

Name :

Contact Number : (for next of kin)

BOOKING AND PAYMENT SELECTION

Full Weekend :

Single Room

Twin Room (sharing with?)

Payment Method :

Bank Transfer

Standing Order

I will be attending with : (table and accommodation allocation purposes only and not guaranteed)*

1.

2.

3.

*Adding these names does not guarantee all named persons will be booked onto the event - bookings are taken on a first come, first served basis.

I have read and understood the terms and conditions as found on the attached document, and fully understand that my booking is not final until full payment for the even is received, along with a completed and signed booking form by Birds of a Feather.

SIGNED :

DATE :

Electronic return by email of this form is deemed to be the same as a physical signature.

Return this booking form to : bookings@birdsof Feather.uk.com and state in the subject line of your email 'OCTOBER 2022 RETREAT'