

## CHURCH WEEKEND BOOKING FORM Rose Hill School, 30<sup>th</sup> April/1<sup>st</sup> May 2016

## **NAMES**

| Names of attendees over 16 A  | s of attendees over 16 Attending (please tick) |                 |             | SUN                         |        |
|---|--|-----------------|-------------|-----------------------------|--------|
| 1.  |  |                 |             |                             |        |
|   |  |                 |             |                             |        |
| 2.  |  |                 |             |                             |        |
| 3.  |  |                 |             |                             |        |
| 4.  |  |                 |             |                             |        |
| Names of children (16 and under)  | Age  | School year     | Sat         | Sun                         |        |
| 1.  |  |                 |             |                             |        |
| 2.  |  |                 |             |                             |        |
| ۷.  |  |                 |             |                             |        |
| 3.  |  |                 |             |                             |        |
| 4.  |  |                 |             |                             |        |
| 5.  |  |                 |             |                             |        |
| NOTE: There will be groups for children and you                                       |  |                 |             | t <b>not</b> during Session | ı 3 or |
| Saturday evening. Children cannot be brought t  | o Session                                      | 3 and left una  | ttended.    |                             |        |
| CONTACT DETAILS   |  |                 |             |                             |        |
| Address   |  |                 |             |                             |        |
| Post code   | Email  |                 |             |                             |        |
| Phone contact number(s)   |  |                 |             |                             |        |
|   | ••••••   |                 | ••••••      | ••••••                      |        |
| COST Weekend: Adults - £18; Concessions/stu   | dents - £1                                     | 12: Ages 5 – 16 | - £9: Unde  | er 5s – FREE                |        |
| Single Day: Adults - £9; Concessions/students - £6; Ages 5 – 16 - £5; Under 5s – FREE |  |                 |             |                             |        |
| Sunday morning service <b>ONLY</b> is free of charge.                                 |  | -               |             |                             |        |
| If possible, I would like a lift on Sat/Sun/ both da                                  | nys/ Sun s                                     | ervice only (pl | ease delete | e as appropriate).          |        |
| Please return cheque/cash with this form to the                                       | church o                                       | ffice (cheques  | payable to  | St. Matthew's Chur          | ch).   |
| Signed  | Date   |                 |             |                             |        |

