Booking Form



Tuesday, 21st November 2017

Event Venue: The Premiership Suite, Leicester Tigers Aylestone Road, Leicester LE2 7TR

www.aquestionofbrains.org

Name		Position			
Company					
Address					
		Postcode			
Email		Telephone			
Please accept	my booking for the following tickets for A Q	uestion of Brains 21 st November 2017:			
Please allocate meor		Table(s) of 10 seats at £1000 per table			
Please allocate me		Individual tickets at £110 each			
I enclose a cheque made payable to Steps Conductive Education Centre in the sum of £or or Please invoice me for the sum of £					
Signed		Date			
Rosemary Cor	es and bookings please contact: nley, A Question of Brains,				
P.O. Box 10470 Markfield. LE67 9XP		Tel. Peter Legg on 01530 249396 Email: enquiries@aquestionofbrains.org			
Official use only		Please note: Please return the booking form by post or email and an invoice or receipt will be sent to you			
Date received Invoice issued Payment received Tickets dispatched Dietary Reqm sent		as required. Details of how to pay by bank transfer are printed on the invoice. Following your payment, 50% of invoice amount will be charged to cancellations before 30 September 2017; thereafter no refunds will be given. By signing and returning this booking form you understand that photographs may			
			Dietary Reqm rtnd Notes		be taken of you during the event which may be used to publicise future events. Your contact details may be stored electronically and used to notify you of future events. We will not pass on your details to anyone else.