

REGISTRATION FORM

'IN HIS NAME'

September – November 2010

Name

Address.....

.....

Contact number(s).....

Church.....

Payment enclosed/to follow (delete as appropriate).....

Please return this form to:

*Lynda Sebbage
5 Theobald's Close,
Long Melford CO10 9BX*

No later than **7TH September 2010 please.**

Thank you.

All bookings subject to availability/change