



LADIES NIGHT BOOKING FORM

- **FRIDAY 28TH JULY – 7PM CHELTENHAM RACECOURSE (GOLD CUP SUITE)**
- **£55 PP**
- **TABLES OF 10 AVAILABLE - £550**

I WOULD LIKE TO BOOK _____ LADIES NIGHT PLACES

I WOULD LIKE TO BOOK A TABLE OF 10

NAME: _____

COMPANY NAME (IF APPLICABLE): _____
(THIS WILL BE THE REFERENCE ON THE TABLE PLAN AS WELL)

ADDRESS: _____

POSTCODE: _____ TEL: _____

EMAIL: _____

PAYMENT METHOD:

PLEASE TICK HERE IF YOU WANT TO PAY VIA A BACS TRANSFER TO:
ACCOUNT NO. 27758141 SORT CODE: 60-05-16 REFERENCE: NAME/COMPANY NAME

PLEASE TICK HERE IF YOU WISH TO PAY BY CREDIT/DEBIT CARD (WE WILL CALL YOU TO TAKE PAYMENT OVER THE PHONE, PLEASE NOTE THERE IS A 3% CHARGE FOR CREDIT CARDS)

PLEASE FIND ENCLOSED A CHEQUE FOR THE SUM OF £ _____
(CHEQUES SHOULD BE MADE PAYABLE TO CHARLIE SHARPLES TESTIMONIAL YEAR)

PLEASE TICK THIS BOX IF YOU REQUIRE A VAT RECEIPT

SIGNED:	DATE:
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PLEASE SEND YOUR COMPLETED FORM TO:

EMAIL: info@charliesharples.co.uk

POST: CHARLIE SHARPLES TESTIMONIAL, 30 NETHERWOOD GARDENS, CHELTENHAM, GL51 8LG

THANK YOU FOR YOUR SUPPORT



TERMS AND CONDITIONS

- YOUR TICKET INCLUDES A CHAMPAGNE RECEPTION ON ARRIVAL, A 2-COURSE MENU AND A DISCO. THERE WILL BE A CASH BAR CLOSING AT 11.30. EVENT TO FINISH AT 12AM.
- UPON RECEIPT OF PAYMENT WE WILL SEND AN EMAIL AS CONFIRMATION OF BOOKING.
- APPROXIMATELY 4 WEEKS BEFORE THE DATE OF THE EVENT WE WILL SEND YOU AN E-TICKET. ALONG WITH THE MENU FOR YOU TO CONFIRM ANY VEGETARIAN, ALLERGIES OR DIETARY REQUIREMENTS IN ADVANCE. WE CANNOT GUARANTEE THAT ANY DIETARY REQUESTS SUBMITTED TO US ON THE DAY CAN BE ACCOMMODATED SO PLEASE NOTIFY US BY THE DEADLINE PROVIDED ON THE EMAIL.
- WE WILL ALLOCATE TABLES AND TABLE LOCATION ON A FIRST COME, FIRST SERVED BASIS.
- PAYMENT IS BY BACS, CHEQUE, OR CREDIT/DEBIT CARD ONLY AT THE TIME OF BOOKING; WE CANNOT HOLD TABLES WITHOUT PAYMENT IN FULL. WE CAN HOWEVER ISSUE YOU AN INVOICE/RECEIPT UPON PAYMENT.
- IF YOU ARE A PARTY OF LESS THAN 10, IT IS LIKELY YOU WILL BE SAT WITH OTHER GUESTS.
- IF YOU ARE RETURNING BOOKING FORMS INDIVIDUALLY BUT WISH TO BE SAT TOGETHER AS A GROUP, PLEASE CLEARLY STATE THE NAMES OF THE OTHER MEMBERS YOU INTEND TO SIT WITH, OR ALTERNATIVELY PROVIDE A TABLE/BOOKING NAME AS A REFERENCE.

BY SENDING AND RETURNING YOUR COMPLETED BOOKING FORM, YOU CONFIRM THAT YOU AND YOUR GUESTS HAVE READ AND AGREE TO ABIDE BY THE TERMS AND CONDITIONS.

PROCEEDS FROM THE EVENT GO TO THE TESTIMONIAL AND ITS NOMINATED CHARITY:

