Nore Gala Night 2018

Guest Details			Dietary Requirements		
Title	**First Name**	**Surname**	**Vegiterian**	**Gluten Free**	**Food Allergies**
Bro	Fred	Example		✓	

Total number of Guests: _____

Total amount of deposit paid: £ _____ (50% per guest is required to secure booking)

Method of Payment: *Cheque. / Cash. / Other

Name: _____ **Contact Number:** _____

Signed: _____ **Date:** _____

*** Cheques made payable to Nore lodge**

Replies to: Paul Palmer
Email: paul_x2k@hotmail.com