Retreat Booking Form

**Venue:** Vincentian Divine Retreat Centre, Franciscan Friary, Monastery Road, Pantasaph, Holywell. CH9 8PE

**General Details**

Title (Underline as appropriate) Mr, Mrs, Miss, Ms, Rev, Father, Sister, Brother, Dr Other …………...

First name …………………………………. Surname ………………………………………

Address ……………………………………………………………………………………………………………

Town/City … ……………………………………………………………………….Post Code ………………..

Contact phone no: (Daytime) …….………………………… Mobile ………………………………………….

Email …………………………………………………………………………………………………………….…
Booking acknowledgement will be sent by email. We may also use this email to send our newsletter to you. If you do not wish to receive our newsletter please tick this box 

 **Accommodation is very basic (remember it's a retreat!)

Please bring your own bedding (Duvet cover, Sheet, pillowcase) and towels.**

*Preferred Room Request*

* Single occupancy room
* Twin room

If you’re opting for a twin room please provide the name of the person you’re sharing with and make sure they send a separate booking form. ………………………………………………………………………………………………………………...……

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**Medical**

Do you have any dietary requirements? (Food will be a choice of either Indian or English)

Do you have any other needs we need to be aware of such as mobility limitations? (Please note mobility facilities are limited at Pantasaph Friary)

If so, please give details: …

Please describe any health problems/medical conditions that we need to be aware of: …………………………………………………………………………….………………………………….........
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Emergency contact details:

Name ………………………………..……………….… Tel No …..……………………..…………………….

Email …………………………………………………………………………………………………………….…

**Weekend Price**Prices include conference fee, 2 nights’ accommodation and meals.

 £150.00 per person

I enclose a non-returnable fee of £ **……………** (Deposit is£50 Sterling per person with balance payable on arrival of the weekend)

**Please don’t send cash through the post.**

*We try to confirm places as quickly as possible. When retreats are full we hold a waiting list.*

Please make cheques payable to R M Powell and attach to your completed booking form.

If you are transferring by BACS please tick this box 

For direct bank transfer:

Account: R M Powell (Ministry a/c) Bank: NatWest

Sort Code: 01-08-32 Account number: 60267526

Data Protection: Unless you instruct us otherwise we keep your contact details on file in order to keep you up to date with any other retreats or days of interest. Your details will be kept securely and not shared with external organisations for marketing purposes. Alternatively please tick the box if you would prefer we destroy this booking form at the end of the retreat 

Please complete this form and return to: *Karen Ladley, 6 Walker Close, Haslington, Crewe, Cheshire. CW1 5RW* or email karen.ladley@gmail.com

Signed ……………………………………………………………… Date ………………………………………

Admin use only:

Booking confirmed: Yes/No Waiting List: Yes/No

Deposit paid £…………............. Balance to Pay £ ………………………

Received by …………………..…………..……………. Date …………………………..………………