

## **Community Voluntary Service Booking Form**

43 Bromham Rd, Bedford MK40 2AA | Tel: 01234 354366 | Email: info@cvsbeds.org.uk

## **Event Booking Request**

Event Title					
Event Date & Venue					
Delegate Name(s)					
Organisation Name					
Contact Details	Telephone number:	Email address:			
Address					
Event Fee	Total cost:				
(unless FREE, please complete the box below)	Total Cost.				
Payment Details	Invoice Organisation	BACS Transfer	to	Cheque or Cash	
(please indicate your payment choice)	Supply address for invoice (if different to above)	use ref: CVS Eve SC 40-52-40 A/c No: 0000640 Receipt Requir	69	Cheques payable to CVS  Receipt Required?	
Please indicate if you have any particular dietary or access requirements for the event.					

Return your completed form to <u>info@cvsbeds.org.uk</u>. We will contact you to confirm your booking. Cancellations must be notified – refunds are not available within 14 days of the event date.

Strengthening local social action