

## **TABLE BOOKING FORM**

South of England & South Wales Awards Dinner



For sponsorship opportunities please contact Victoria Armstrong on 0796 8448 365 or victoria@sasevents.co.uk



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Please return this booking form by email or post to: Clare Davies, Createvents Ltd, 450 Brook Drive, Reading, Berkshire RG2 6UU Email: clare@createvents.co.uk; Tel: 01183 340085

Please note: Tables are allocated on a first come/first served basis, so book early to ensure a prime position. Bookings are only accepted with full payment in advance. Your table booking is not guaranteed until you have received written confirmation from Createvents. If you do not receive confirmation within 10 working days, please contact Createvents on 01183 340085.



## South of England & South Wales Awards Dinner

Table Booking Form	
Venue: At-Bristol, Anchor Road, Harbourside, Bristol BS1 5DB Time: Reception Drinks – 7pm, Lunch – 7.30pm	Date: Thursday 4 May 2017 Dress: Black Tie
If you are booking on behalf of a BCO member please supply their n	ame and membership number.
Membership No Na	ıme
Contact Details	
Write clearly and in CAPITALS (Please name the contact to whom t	he VAT receipt, confirmation, and further details should be sent).
Title First Name	Surname
Company Name	
Address	
	Postcode
Email	Tel
Is your company involved in any entries for the BCO Awards 2017?	Yes No
Is yes, please state the application number and the name of the projection	ect entered:
The BCO would like to contact you with further relevant information	n (wa will not pass your datails on to third parties)
tick here if you do not wish to receive emails	tick here if you do not wish to receive direct mail
Payment Method	
Please reserve table(s) of 10 places @ a cost of £1,200 p	per table + VAT @ $20\%$ (£240) = £1,440 per table
Please reserve place(s) @ a cost of £120 per place + VA	$\Gamma @ 20\% (£24) = £144 \text{ per place}$
Price includes drinks reception, three course meal, tea & coffee, and Awards Presevenue, we are unable to offer refunds. The BCO are unable to raise invoices in adv	
Total payment £ $\square$ (inc VAT). Full payment is required at t	he time of booking.
I enclose a cheque for £ made payable to "British C	ouncil for Offices"
Please debit my Visa/Mastercard (please delete as necessary)	
Credit Card number	
Security Code (Last 3 digits on reverse of card) Ex	piry date Signature
Cardholder's name and address, if different from details above.	Billing address, if different from details above.
Title First Name	Full Name
Surname	Company
Address	Address
Postcode	
Email	
Tel	Postcode