## BLAENAVON MALE VOICE CHOIR



## **EVENTS BOOKING FORM**

ENQUIRY DETAILS:											
DATE	CONTACT NAME &				CONTACT EMAIL & TELEPHONE				2 <sup>nd</sup> CONTACT NAME & EMAIL		
ENQUIRY	C/O ADDRESS:			NUMBER :				ADDRESS:			
<b>RECVD</b> :											
EVENT DETAILS:					EVENT TYPE:			CO	COMMENTS:		
									Choir to Sing:		
Proposed date of event:					WEDDING:					8	
-											
Proposed Event Start Time:					Bride Name:						
D 117					Groom Name:						
Proposed Venue:									Order of songs to be confirmed		
(Please provide full address incl postcode)											
					CONCERT:				VIP: YES / NO WHO:		
					OTHER:						
					Expected Numbers:						
<b>EVENT REQUIREMENTS:</b>											
TRANSPORT REQUIRED						CHOIR KEYBOARD REQUIRED					
-					/ NO (Please discuss with choir)						YES / NO
not considered local to the choir)											
DISABLED ACCES TO THE YES					/ NO AVAILABLE CHANGING FACILITIES FOR TH					FS FOR THE	YES / NO
PERFORMANCE AREA				ILS	YES / NO AVAILABLE CI CHORISTERS						IES / NO
Special Requirements:											
(please use comments box for additional space)											
additional space)											
After Glow Venue & Details: At ve					nue – Chorister refreshments kindly provided by organisers.						
Alter Olow Venue & Details. At Ve					nut – v			cites kindly p	51001	ucu by organis	
Fee Due:			Date Paid:				Payment Method:				
			BACS					CASH CHEQUE OTHER			
Date Event			BACS information can be supplied separately								
Confirmed For Cho							5		TT.		J
For Cno Musical Tean			VF	S / NO			Date Trop	nenort Rooka	đ		
							Date Transport Booked & Company Used:				
Choir Numbers Available <b>YE</b>			YES	S /NO			-	st Booked:			
							24007111	St Booked.			

Please send completed forms to: <u>Blaenavonmvc@gmail.com</u> -