

THA Regional Event, Penshurst Place, Kent

Saturday 11 November 2017, 19:00

Nar	ne: Matriculation Year:				
Add	dress:				
	Postcode:				
Tele	ephone:Email:				
	I would like to book place(s) at the dinner (£50 per head)				
	I would like to book place(s) at the dinner (£25 per head for alumni who matriculated in 2007 or later)				
	Dietary Requirements:				
	Guest Name (if applicable):				
	Guest Dietary Requirements:				
	Seating Requests:				
	I enclose a cheque for £ payable to 'Trinity Hall Association'				
	I wish to make a payment of f , by payment card (please complete the card payment form)				
	ase return to: mni and Development Office, Trinity Hall, Cambridge, CB2 1TJ				
	ernatively, bookings can be made by phone. Please call: 23 332550				
	remail enquiries, please email: nnioffice@trinhall.cam.ac.uk				



Card Payment Form - THA Kent

Saturday 11 November 2017

The card is a Visa/I	MasterCard/Mae	estro/Delta (de	ete as appropria	ite)
Card number:	/	/	/	
Card valid from: _	/	Card expires: _	/	
3 digit security num	ber found on the	e reverse of the	card:	
Maestro issue numb	per (if applicable)	:		
Amount to debit ca	rd: £			
Cardholder's signat	ure:			
Card holder's de	tails:			
*Required fields				
*Name:				
*Statement Address	::			
*Postcode:		_ Country:		

Date Received: ___ / ___ / 20___

you have the right to object to the use of your data for any of these purposes.

For office use only: