 Saturday October 15th 2022

Westland Entertainment Venue

Westbourne Close

Yeovil, BA20 2DD

**REGISTRATION FORM (PLEASE COMPLETE IN BLOCK CAPITALS)**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ROTARY CLUB OF: |  | | | | | | | | | |
| Delegate First Name: |  | | | | | | | | | |
| Delegate Surname: |  | | | | | | | | | |
| Office Held October 2022 | Club: |  | | District: | |  | | | | |
| Preferred badge name: |  | | | | | | | | | |
| Special dietary, mobility, hearing or visual needs |  | | | | | | | | | |
| Address: |  | | | | | | | | | |
| Telephone: | Home: |  | Work: |  | | | Mobile: | |  | |
| Email: |  | | | | | | | | | |
| **Guest** | | | | | | | | | | |
| If Rotarian or Inner Wheel, Club and office October 2022: |  | | | | | | | | | |
| First Name: |  | | | | | | | | | |
| Surname: |  | | | | | | | | | |
| Preferred badge name: |  | | | | | | | | | |
| Special dietary, mobility, hearing or visual needs |  | | | | | | | | | |
| **BOOKING** |  | | | | Price | | | Number | | Total |
|  | Day Delegate | | | | £40.00 | | |  | |  |
|  | Standard Breakfast Roll | | | | £3.50 | | |  | |  |
|  | Vegan Breakfast Option | | | | £3.50 | | |  | |  |
|  |  | | | |  | | | Total | |  |

When completed please return this form together with your cheque for the **Registration fee** to the Conference Registrar at the address below.

Cheques should be made payable to “Rotary District 1200 Conference 2022”.

Registrar: Tony Poole, 19 Helens Road, Sandford, Winscombe, BS25 5PD

Email: [d1200conf2022@gmail.com](mailto:d1200conf2022@gmail.com) Tel: 07968 700032

If you prefer to pay through your own online banking facility please send your payment to the following account: RI District 1200 Conference 2022, Account number 39052663, Sort Code 30-98-97 and tick this box to confirm this has been done

Signature………………………………………………………………………………………………………………….. Date…………………………………