

FREE FREE FREE FREE

All who pay their deposit for The Dream Week by January 31st 2009 will be entered in the draw for one FREE Week of Knitting - worth £308.00

KNITTERS DREAM WEEK BOOKING FORM - 2009

Name & Address for Correspondence

TITLE _____ INITIAL _____ SURNAME _____

ADDRESS _____

_____ POST CODE _____

TELEPHONE NUMBER INCLUDING DIALLING CODE

DAYTIME _____ EVENING _____

Date of Arrival Mon. August 31st 2009 Date of Departure Fri. September 4th 2009

Type of Room required 3 Star _____ Ambassador _____

Names of room occupants

Title	Initial	Surname	Twin/ Double Bed
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1	_____	_____	_____
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2	_____	_____	_____
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Special Requests Please let us know if there are any special needs for your party.

A non - refundable deposit of £50.00 per person is requested to secure your place on the Knitting Week and your accommodation.

Insurance available @ £10.00 per head.

Total Enclosed _____

Please send this form with a cheque made payable to 'Metropolitan' OR

Your Credit Card Number

Start Date _____ Expiry Date _____

Card Security Number _____ The last three digits on the back of the card _____

Switch Cards Issue Number _____

Please PRINT name as on Credit Card

Signature

Make and model of your knitting machine