

Hotel Booking Form

Name:

Address:

Desired room type: SINGLE / DOUBLE / TWIN (please circle)

Room wanted for: FRIDAY / SATURDAY / SUNDAY nights.

If you have a partner or sharer for a twin or double room please give his or her name:

If you need us to find you a sharer (we'll look for same-sex sharers only), please tell us the following about yourself:

MALE / FEMALE

SMOKER / NON-SMOKER

A really late-night filker: YES / NO

Please use the space below to indicate any special dietary or other needs you may have, and notes about who you could/couldn't share with, if necessary.

If you do not wish to ruin your copy of the PR1, a printable copy of this form is at <http://www.contabile.org.uk/PR2-form.pdf>