

Home Fellowship Group Leader Name:

## CMJ UK CONFERENCE 5-7 July 2024

## 2024 CONFERENCE

## HOME FELLOWSHIP GROUP BOOKING FORM

(for parties of 5 or more Adults - 5% discount)

Please complete the form below with details and the names of all attending the HOME FELLOWHIP BOOKING. Each person/pair should also complete a booking form for their details per room. Forms should all be submitted with this form together with deposits. Thank you.

Telephone		Mobile				
First Name	Surname		First Name	Surname		

Address

Postcode

	Booking	terms	and	cond	litions:
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Date Monthly Booking Numbers updated:

HOME FELLOWSHIP Group booking rate of £218.50 per person sharing a room and £256.50 per person sole use of room, if 5 or more adults booking. Children 11 and under are **free**. **Young Person rate** (aged between 19 and 25) is just £95 for the whole weekend. Youth Conference for 12-18's **only** £49.

**Deposits:** A non-refundable deposit of £50 per person is required at the time of your booking, excluding Youth Conference. The balance of your payment is due by **30th April 2024**.

**Cancellation Policy:** The majority of the cost of a residential event is the accommodation charge which we have to commit to the Conference Centre well in advance of the event. We are therefore, unable to give refunds after 1st May 2024.

PAYMENT INFORMATION				
Full cost for those on this form (	number of people x <b>total</b> amount payable ea	ach): £		
Donation to the Bursary Fund:		£	This is to help those who would be unable t	to attend the Conference.
Donation to CMJ UK		£		
Total cost		£		
Less Deposit to be paid (£50 per	person x number of people on this form):	£		
Balance owing to be paid by 30	th April 2023	£		
TOTAL AMOUNT PAYABLE WITI	H THIS FORM: (Deposits and donations)	£	Please make cheques paya	ble to 'CMJ UK'.
Card payment: Card Type: Mast	ercard 🗆 Visa 🗀 Debit Card 🗀 Credit card	d $\square$ Card Holder (nan	ne as on card)	
Card No: (16 figures)		iry Date	Security No.	
//	/			
Please check	k that you have completed all the required in CMJ UK, Eagle Lodge, Hexgreave Ha For further information, please o	ıll Business Park, Farns	_	dress:
ADMIN USE ONLY PLEASE Date processed:	PUT INITIALS BESIDE EACH DATE ENTRY Amount received:	Payment	type: CHQ / CASH / CC / SQ / PayPal / BACS	INITIALS:
Date put onto Subscriber:	Date acknowledgement sent:	Date accommoda	tion booked:	

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Date form scanned to Subscriber: