HOLY TRINITY CHURCH LONGLEVENS – HALL BOOKING ENQUIRY FORM

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| Name: | Contact Telephone Number: |
| Address: | Email Address: |
| Date of Event: | |
| Times required (i.e., from and to): | |
| Details of Party / Event / Activity  Please include numbers attending, any music, dancing or preparation of food that might be taking place: | |
| **When completed please return this form to:** [**hallhire@holytrinitylonglevens.org.uk**](mailto:hallhire@holytrinitylonglevens.org.uk) | |