HOLY TRINITY CHURCH LONGLEVENS – HALL BOOKING ENQUIRY FORM

|  |  |
| --- | --- |
| Name: | Contact Telephone Number: |
| Address: | Email Address: |
| Date of Event: |
| Times required (i.e., from and to): |
| Details of Party / Event / ActivityPlease 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** |