

ROYAL NAVAL ASSOCIATION No.4 AREA REUNION WEEKEND

32<sup>nd</sup> ANNUAL RE-UNION at DURRANT HOUSE HOTEL, BIDEFORD, DEVON

9<sup>TH</sup>/10<sup>TH</sup>/11<sup>TH</sup> MARCH 2007

Branch.....

Branch Representative: -

Name.....Address.....

Post Code.....Telephone No.....

The above branch wish to book .....Places for the annual reunion or Saturday Formal Dinner and Sunday Lunch at **£92.00** per Person which includes Sunday lunch or **£102.00** per person if they would like to take up the offer of the extra night (which would include Sunday night Dinner and Monday breakfast) Branch's within a 10 mile radius will be allowed to attend the Wine Reception, Formal Dinner and Sunday lunch if there is room available Cost will be **£32.00**. Please indicate on booking for your requirements. A branch cheque for the full amount made payable to "No 4 Area Reunion Fund"

A Cheque for the amount of is £..... is enclosed

PLEASE DO NOT SEND BEFORE 1<sup>ST</sup> NOVEMBER 2006

DO 'NOT' REPEAT 'NOT' WRITE AMOUNTS ON THE BOOKING FORM.  
THE BOOKING FORM IS FOR THE HOTELS BENEFIT ONLY

**And send to: - Re-union Treasurer**

S/M Mick Arnold, 35, Larks Rise, FERNDOWN, Dorset BH22 9QU (01202 875707)

**We need at least 200 people to attend for sole occupancy, there are only limited single rooms available, bookings will be based on the first come basis.**

It is suggested that branches only bring No.4 Area RNA Members and Spouses until we see if there is any spare places available

Signed.....  
Branch Representative

If you require further information contact: - **Re-union Secretary Howard Jeffries**

10, Park Road, STREET, Somerset. BA16 OJN

Phone: 01458 447530 - Mob: 07745 244427 - Email: h.jeffries@virgin.net

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Royal Naval Association No.4 Area 32<sup>ND</sup> Reunion Weekend

Receipt for Monies and Booking Form

The.....Branch has booked.....places

The Reunion Treasurer has received a Cheque for the Sum of.....

and Booking Form for .....Weekend places – Saturday Formal Dinner and Sunday lunch

Signed..... (Mick Arnold) Reunion Treasurer

Dated.....

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BRANCH NAME.....

Name	Special Diet/Disabled, Wheelchair etc. Shower/Bath if possible, Porterage.	Extra Night	Saturday Formal Dinner and Sunday Lunch