

BOOKING FORM

Christmas Fayre 3 Course Menu for ____ adults / ____ children

Christmas Fayre 2 Course Menu for ____ adults / ____ children

Name: _____ Tel: _____

Email: _____ Date Required: _____

Time: _____ Company (if applicable): _____

Does anyone in your party have any food allergies? Please detail names below

Any additional comments:

PLEASE COMPLETE FOOD CHOICES ON THE REVERSE

Non-refundable deposit of £10 per person required for Christmas bookings.
We request that you pre-order for your party to assist food service.

STAFF USE ONLY

Booking taken by: _____ Date: _____ Deposit taken: £ _____

Food Allergies & Intolerances

Before ordering drinks or food, please speak with a team member about your requirements.

