OA Society - Battlefields Tour

Friday 20th May – Sunday 22nd May 2016

Expression of Interest & Deposit

Name ……

I would like to attend the OA Battlefields Tour

My wife / husband / partner would also like to attend, his / her name is

…….....

Please find enclosed deposit for ….. place(s) at £50.00 per place

£……. made payable to "The Old Aldenhamian Society".
A minimum number of bookings is needed to make the trip viable - deposits will be returned if this number is not met by November 1st 2015.

Please indicate if you have any special dietary requirements or mobility issues:

……..

Years at Aldenham: from ……...to……House……..

Address

……..

……Post Code……..

Tel: Home ……..

Fax……...

Work ……

Mobile …….

Email ……...

Occupation……..

Company Name & Address.....

(The information asked for on this slip is to enable the OA database to be kept up to date and is not for publication.)

Please return this slip to **Ann Saffery, Development & OA Manager, Aldenham School, Elstree, Herts WD6 3AJ** by **Friday 30th October 2015**.
Email: oas@aldenham.com
Telephone: 01923 851612/4 Fax: 01923 854410