BOOKING FORM—Fundraising Dinner 4.4.24

The information you provide will be used for contact purposes and will be used only by the Conservative Party; including its candidates, representatives and associations. We will not give information to anyone else. Full details of our Data Protection Policy can be found at https://www.conservatives.com/privacy

NAME					
ADDRESS					
		•••••		••••••	
TELEPHONE	EMAIL	•••••		£	
LWOULD LIVE TO ATTEND whose w					
I WOULD LIKE TO ATTEND, please r	eserve		places @ £55 each		
		or	a table x 8 @ £440		
	PLEASE COMPLETE ME	NU CHOICE	ES ON REVERSE OF THIS FORM		
I WOULD ALSO LIKE TO PRE-ORDER	R WINE				
Red Wines					
ARGENTINIAN MALBEC, MENDOZA	2022 @ £20 x	bott	les		
CHÂTEAU LA PERVENCHE, LALANDE	EAU LA PERVENCHE, LALANDE-DE-POMEROL 2017@ £30 xbottles				
White Wines					
CHARDONNAY, PAYS D'OC 2022 @ £20 xbottles					
CHÂTEAU MARJOSSE BLANC, BORD	EAUX 2021@ £30 x	,	bottles		
To book whose sixbow					
To book, please either:					
•forward total payment to the Chairman, 54 Broad Street, Ludlow, Shropshire, SY8 1GP					
(Chqs payable to LCCA please) or				Enclosed /	
•pay by bank transfer to sort code:	30-95-27 Account:	0010156	6 ref surname - Dinner	Paid online	
Please email info@southshropshire	conservatives.org.u	ık to let ι	ıs know you have		
booked and paid.					
Diagon and recommend on a first same	first some of books	annl	why to ovoid disamesistes	ont and to	
Places are reserved on a first come	_			ent and to	

guarantee your food choice, please apply by 21st February 2024.

I AM UNABLE TO ATTEND BUT ENCLOSE A DONATION OF £					
I also confirm that I am a UK citizen living in the UK at the above address.					
I AM UNABLE TO ATTEND BUT WOULD LIKE TO DONATE AN AUCTION PRIZE OF					
Value: £					



MENU CHOICES—Fundraising Dinner 4.4.24

Poached & Smoked Salmon Terrine
Watercress, Pear and Goats Cheese Salad with Honey and Mustard Dressing

Rack of Lamb with Orange and Thyme Glaze Baked Asparagus and Cherry Tomato Risotto

Chocolate Roulade Lemon Posset with shortbread and Raspberries

Please indicate menu choices for each guest. If you or a member of your party have any specific dietary requirements, please tick box next to name and give full details at the bottom of this form. Many thanks.

NAME	STARTER	MAIN	DESSERT	DIETARY REQUES
LEAD GUEST 1:				
GUEST 2:				
GUEST 3:				
GUEST 4:				
GUEST 5:				
GUEST 6:				
GUEST 7:				
GUEST 8:				
DIETARY REQUIREMEN [®]	TS (please state full details	s)		