



SAND MARTINS

GOLF CLUB



CHRISTMAS PARTY BOOKING FORM



Date:

Please reserve places

Date required

At a cost of per person

Contact Name

Company Name

Address.....


.....

.....


Telephone

Email

I enclose £..... as a non-refundable deposit of £10 per person payable by:

 Card (please call to provide your card details)

— or —

 BACS please use the following details;
Account: Sand Martins Golf Club Ltd
Sort Code: 40-02-44
Account no: 32649004

Please return this form to:
Sand Martins Golf Club, Finchampstead Road,
Wokingham, Berkshire RG40 3RQ
Tel: 0118 902 9960 | Email: sales@sandmartins.com

Signature:

I have read and understood the terms and conditions.

