

PLEASE RETURN TO STUDENT RECEPTION BY MONDAY 14 OCTOBER 2024

Name _____

Tel. No. _____

Email Address _____

Name of Child _____ Tutor Group _____

Number of Tickets Required _____ (£12 per person; Under 18s £10)

I would like to be on the same table as (names): _____

Allergies/vegetarian options: _____

I enclose cash or a cheque to the value of _____

(Please make cheque payable to Drayton Manor High School PTA).