
Attendees and Seating Requests

Please detail below the names of those you are purchasing tickets for on this form, and if you would like to be placed on a table with other attendees.

- | | |
|-----|---|
| 1. | Ticket purchase <input type="checkbox"/> Seating request <input type="checkbox"/> |
| 2. | Ticket purchase <input type="checkbox"/> Seating request <input type="checkbox"/> |
| 3. | Ticket purchase <input type="checkbox"/> Seating request <input type="checkbox"/> |
| 4. | Ticket purchase <input type="checkbox"/> Seating request <input type="checkbox"/> |
| 5. | Ticket purchase <input type="checkbox"/> Seating request <input type="checkbox"/> |
| 6. | Ticket purchase <input type="checkbox"/> Seating request <input type="checkbox"/> |
| 7. | Ticket purchase <input type="checkbox"/> Seating request <input type="checkbox"/> |
| 8. | Ticket purchase <input type="checkbox"/> Seating request <input type="checkbox"/> |
| 9. | Ticket purchase <input type="checkbox"/> Seating request <input type="checkbox"/> |
| 10. | Ticket purchase <input type="checkbox"/> Seating request <input type="checkbox"/> |
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Please complete this form and place in the fees box in the kinder foyer or email to

fundraising@burchmemorial.com.au

Once payment has been received, an email will be sent confirming your booking.

Questions? committee@burchmemorial.com.au