**Booking Form for Company at Christmas**

**Christmas Day Lunch**

**At St Johns School, Glan Road, Aberdare**

**Please Complete and Return To:**

**Carolyn Walton-Freeman, 11 Larkfield Avenue, Aberdare CF44 0JQ**

**Or e-mail: its4carolyn@gmail.com** **Tel: 07771 861979**

Yes Please – I would like to come to this year’s Christmas Day lunch.

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Post Code:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Number Home:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M**obile:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Care Worker Name and contact number (If appropriate**): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contact details – Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Telephone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If bringing a small child will you require a high-chair?   Yes / No / N.A**. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do you require a Vegetarian meal?  Yes / No** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Any special Dietary needs or Allergies (e.g. Gluten free/nut allergy?)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do you require Transport?  Yes / No** \_\_\_\_\_\_\_\_ **If Yes, do you need transport both way**s? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do you have any medical conditions or issues? Yes /No:** \_\_\_\_\_\_

**If Yes, please state:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do you use a mobility aid e.g. walking stick or frame? Yes /No:** \_\_\_\_\_\_

**If Yes, please state:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return this form by 10th December to the address above with your £5 deposit**

**(cheques can be made payable to “PCC St Fagan’s”)**

***Please see overleaf for important information about data protection and consent.***

**Data protection**

The Cynon Uchaf Ministry Area (of which St Fagan’s Church is a part) takes the security of your data very seriously. If you wish to find out more about how your data is stored, a copy of our Privacy Notice is available on the parish website (www.stfagansaberdare.co.uk/safeguarding-policies/) or from Fr Richard by phoning 01685 881435.

We may wish to contact you about future Company at Christmas events. If you consent to us contacting you, please indicate below the mean by which you wish to be contacted. You can consent to any one, several or all of the means:

Post □ Email □ Text □ Telephone call □

You can withdraw your consent at any time by contacting Fr Richard.