

SWANMORE PARENTS' ASSOCIATION

# QUIZ NIGHT

SATURDAY 20<sup>th</sup> MARCH 2010 - COLLEGE HALL - 7.30 - 11.00 PM

## APPLICATION FORM

Please complete this form and return to College reception where your tickets can be collected.

I .....(name) would like  
..... tickets for the SPA QUIZ NIGHT and enclose cheque/money in  
the sum of ..... (tickets are £7.50 per person - please make  
cheques payable to Swanmore Parents' Association\*)

My contact details are: Telephone:.....

Child's name:.....

and year:.....

\*We recommend teams of 8-10 but if smaller we can pair up teams or seat you individually - please indicate which you would prefer

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