

TICKET REQUEST/BOOKING FORM

The University of Manchester Staff Association's
2009 All Events Booking Form.

Please book me the following tickets/places for :-

_____ (Name of Event).

UMSA Membership Number _____ (must be quoted).

Total No. of Tickets/Places required _____

If applicable please complete the following section.

Member Name..... Membership Number

Member Name..... Membership Number.....

Member Name..... Membership Number.....

Member Name..... Membership Number.....

Number of Non Member's Tickets/Places

TOTAL AMOUNT ENCLOSED £

(please obtain prices from website or flyer)

(cheques payable to The University of Manchester Staff Association)

Contact Name Tel Number

Address (home address if possible)

.....

..... Post code

Please return to Alison Din, School of Pharmacy, Ground Floor, Stopford Building.
Oxford Road M13 9PT Tel. 0161 275 2335 email Alison.Din@manchester.ac.uk