

**Dinner Choices & Payments Form – FRMS AGM 2017**

Name \_\_\_\_\_ Society \_\_\_\_\_

Address & Postcode \_\_\_\_\_

Please list below the Name(s) of Delegates taking the Saturday Night Dinner and in each case enter their choices (e.g. S2, M3, P1) by referring to the 'Dinner Menu'

Name \_\_\_\_\_ Choices \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name \_\_\_\_\_ Choices \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name \_\_\_\_\_ Choices \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Number attending the Recital \_\_\_\_\_

Please make out a cheque to 'FRMS Ltd' for the total amount of your Society's delegation and return to the FRMS Secretary, 6 Oakroyd Close, Brighouse, HD6 4BP by Wednesday October 25, 2017. A receipt will be sent to you if you include a S.A.E. when returning this form. Additional copies are available from the FRMS website at [www.thefrms.co.uk](http://www.thefrms.co.uk).

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