



St John's Chambers Charity Quiz In aid of St Peter's Hospice and MacMillan Cancer Support

Thursday, 10th October 2019 Royal Navy Volunteer, 17-18 King Street, Bristol BS1 4EF

To enter a team of 5, please complete the form below.

	a team of 5, please complete the form below.	
Contact	Name:	
Firm:		
Address	S:	
Email:		
Telepho	one:	
Team de		
No.	Name	Any special dietary requirements?
1		
2		
3 4		
5		
Payment	:	
I enclo	se a cheque made payable to St John's Char	mbers for £125
Do you re	equire an invoice? Yes □ or No □	
Please sta	ate who the invoice needs to be sent to below:	
Please	complete and return this form to:	

Sarah Sands, St John's Chambers, 101 Victoria Street, Bristol BS1 6PU DX 743350 Bristol 36 e: sarah.sands@stjohnschambers.co.uk or f: 0117 929 4821