

— Postal Booking Form —

★ Your Concert

Christchurch Cathedral, Oxford
Wednesday 3 December 7.45pm

★ Your Choice of Tickets

Seating area	Number	Total Value
Gold tickets £25	_____	£ _____
Silver tickets £15	_____	£ _____
Bronze tickets £12	_____	£ _____
Total	_____	£ _____

Within price bands, seats are not allocated. Please arrive in good time to sit in your seating area.

★ About You

Your name: _____

Address: _____

Postcode: _____

Daytime telephone: _____

Evening telephone: _____

Email: _____

Please tick here if you, or anyone in your party, is disabled. We will contact you to discuss your needs.

Where did you hear about *The Spirit of Christmas*?

★ Payment by Credit or Debit Card

Please charge the total amount to my

Mastercard Switch Visa CAF

Sorry, we are unable to accept American Express.

Card number: _____ Switch only

Valid from: _____ / _____ Expiry: _____ / _____

Issue number: _____ Switch only

Final three digits on back of card: _____

Name as it appears on the card:

★ Payment by Cheque

Please enclose a cheque for the total amount,
payable to: **Muscular Dystrophy Campaign.**

★ Where to Send Your Booking

Post this form to:
Spirit of Christmas, PO Box 3103, Gloucester GL4 6WX

★ Please Note

Tickets are subject to availability and we will contact you if we are unable to fulfil your booking request.

Tickets are non-exchangeable and non-refundable.

Please check your tickets carefully as soon as they arrive.

The Muscular Dystrophy Campaign would like to keep you informed of forthcoming events in your area and about our work. If you would prefer not to hear from us, please tick this box.

Thank you for your support