

**REQUEST FOR INVITATIONS**  
**BOOKING FORM**  
**THE PATTENMAKERS' ANNUAL BANQUET**  
**THE MANSION HOUSE**  
**Friday, 26<sup>th</sup> January 2024**

Please complete this form, save and send to: [claire@pattenmakers.co.uk](mailto:claire@pattenmakers.co.uk)

Or print and send to by post to:

Ms Claire Hobson, 4 Sheridan Close, Hemel Hempstead, Herts, HP1 1XS

**From:**

Name (inc. Title and post nominals):.....

Address.....

Dietary requirement .....

I wish to attend alone/with the following guests (number) . . . . .

Please pay by Electronic Bank Transfer:

(quote your name and date of event, eg ClaireHobson260124)

**Pattenmakers Events Limited**  
**HSBC**

Sort code           **40-04-09**  
Account number: **71828924**

Guest details and dietary requirements as as follows:

Name of Guest inc  
Title & post noms .....

Dietary requirement .....

Name of Guest inc  
Title & post noms .....

Dietary Requirement .....

**Please list additional guests, dietary and seating requirements on the following page.**

**PLEASE RETURN THIS FORM BEFORE  
12<sup>th</sup> January 2024**

**It is recommended you book early as all events this year have been well subscribed.**

Pattenmakers Events Limited does not make refunds for cancellations after the number of attendees has been given to the caterers, as we are then committed to paying for the meal even if it is not eaten!

**There can be no refunds for cancellations received after 18<sup>th</sup> January 2024.**

Please list additional guests and dietary requirements below.

If you have any particular seating preferences for you and your guests please indicate them on this form.  
It may not always be possible to comply but we will do our best.

If you have a guest who you think should be mentioned by name during the proposal of the toast to the guests, then please let Claire Hobson have a separate note no later than 19<sup>th</sup> January 2024.

Name of Guest inc  
Title & post noms .....

Dietary requirement .....

Name of Guest inc  
Title & post noms .....

Dietary Requirement .....

Name of Guest inc  
Title & post noms .....

Dietary requirement .....

Name of Guest inc  
Title & post noms .....

Dietary Requirement .....

**Seating requirements**

Please give information here about with whom you would like to be seated, if possible. It will be assumed that you will want to be seated with or very near your guests on this form.

While payment by bank transfer is preferable, if you would rather pay by cheque, please make cheques payable to **Pattenmakers Events Ltd** and post to Claire Hobson, 4 Sheridan Close, Hemel Hempstead, Hertfordshire, HP1 1XS.