

Event Form



Once you have decided on an event, please complete this form, telling us of your plans and return to the address at the bottom of the page.

WHAT is your event?

WHEN is your event?

WHERE is your event?

Contact details:

Name: _____

Address: _____

Postcode: _____ Telephone: _____

Email: _____

Please supply me with:

A4 posters

A3 posters

Sponsor Forms

Tickets

Hospice info

Collection boxes

Other, please specify

PLEASE RETURN THIS FORM AT LEAST 21 DAYS PRIOR TO YOUR EVENT:

Wakefield Hospice Fundraising, Aberford Road, Wakefield, WF1 4TS

Fax: 01924 214042