CORNWALL FEDERATION OF WOMEN'S INSTITUTES **APPLICATION FORM**

LINO PRINTED Chy N Monday 14 Oct	Noweth an Co tober 2024, 10	nteth		
Number of places required @£30 per per	son			
Tick one of the following:				
I enclose a cheque payable to 'CF	WI ' in the amour	nt of £		
I have paid £ by BACS on	(date)	(Quote Ref) LINO		
(Account name: CWLL COUNTY FEDERATION OF WOMENS INST, account no: 00918970, sort code: 30-98-76)				
Contact details (please print clearly) Name:				
Telephone:	_ Email:			
If paying by cheque, please send this a Conteth, Truro Business Park, Threem email a copy of this application to accoreception@cornwallwi.org.uk	ilestone, Truro ounts@cornwal	TR4 9NH. If paying by BACS, please		
Please note: TICKETS ARE TRANSFERRABLE BUT NON-REFUNDABLE in accordance with CFWI policy.				
WI				
NAME	WI MEMBER	CONTACT NUMBER		

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NAME	WI MEMBER (Y/N)	CONTACT NUMBER AND EMAIL ADDRESS