

CORNWALL FEDERATION OF WOMEN'S INSTITUTES
APPLICATION FORM

SPEAK OUT ... FOR ISSUES YOU CARE ABOUT
Thursday 14 November 2024, 10am-3pm

From _____ WI

Number of places required @£5 per person _____

Tick one of the following:

I enclose a cheque payable to 'CFWI' in the amount of £ _____

I have paid £ _____ by BACS on (date) _____ (Quote Ref) SPEAK

(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 application along with your cheque to Chy Noweth an Conteth, Truro Business Park, Threemilestone, Truro TR4 9NH. If paying by BACS, please email a copy of this application to accounts@cornwallwi.org.uk and reception@cornwallwi.org.uk

Closing date: Monday 14 October 2024

Please note: TICKETS ARE TRANSFERRABLE BUT NON-REFUNDABLE in accordance with CFWI policy.



CORNWALL FEDERATION OF WOMEN'S INSTITUTES

SPEAK OUT ... FOR ISSUES YOU CARE ABOUT
Thursday 14 November 2024, 10am-3pm

WI _____

PLEASE PROVIDE NAME(S) OF APPLICANT(S) BELOW

NAME	WI MEMBER (Y/N)	CONTACT NUMBER	DIETARY REQUIRMENTS