



Sleford Playhouse Refund Request Form

Event Name:

Date of Event:

Name Event Booked in:

Booking Reference:

Amount Owed:

Bank account details refund to be paid into:

Account Holder:

Bank Name:

Sort Code:

Account Number:

Contact Name:

Contract Address:

Contact Number

E-mail address:

Please complete and scan or email to: treasurer@slefordlittletheatre.co.uk

Or return via post to: The Playhouse, 54 Westgate, Sleford. Lincs NG34 7PP

For treasurer use only:

Amount Refunded

Date Refunded