**VISIT TO CHAMPFRÉMONT**

**SATURDAY, 27 SEPTEMBER 2025**

***Bookings, please, before Saturday 20 September 2025!***

*Please complete the form in* CAPITAL LETTERS

|  |  |
| --- | --- |
| Name: |  |
| Phone number: |  |
| Email address: |  |

 **Please reserve for me:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Outing and Lunch****(per person)** | **X Number** | **= Cost** |
| EM Member | 25,00 € |  |  |
| EM Member’s Guest | 30,00 € |  |  |
| **Bank transfer total €** |  |

* Members will be given priority

|  |  |
| --- | --- |
| **Participant Names** | **Member** |
| Yes | No |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**ADDITIONAL INFORMATION**

1. Please download and complete this booking form, then email to both:

Mme Armelle JAMELOT – *ajamelot@orange.fr*

Mme Roselyne SPEYER – *tresorier@euromayenne.org*

1. Preferably, please make a bank transfer for your payment for this outing, **with your name and the reference ‘Outing 27.09.2025’** to our *Crédit Agricole* account –

**IBAN:** FR76 1790 6000 9010 8783 8600 003 **BIC:** AGRIFRPP879

1. Please include any dietary requirements in your covering email.