APPLICATION FORM

Title	
First Name	
Surname	
Contact tel	ephone number
Email	
Address	
Postcode	
PAYMENT [DETAILS
Please com	plete ONE of the following
_	n be made by BACS or cheque. Alternatively payment le by credit/debit card when visiting the hotel.
I have r	made a BACS payment for £50 to:
Sort co	de: 20-00-00 Account Number: 83424685
quoting	name and postcode
Cheque	e attached for £50 payable to The Lygon Arms Hotel
I enclos	se a gift voucher
The Lyg	Please complete reference number eturn to the Lygon Reception team on Arms, High Street, Broadway, WR12 7DU. to reception@lygonarmshotel.co.uk