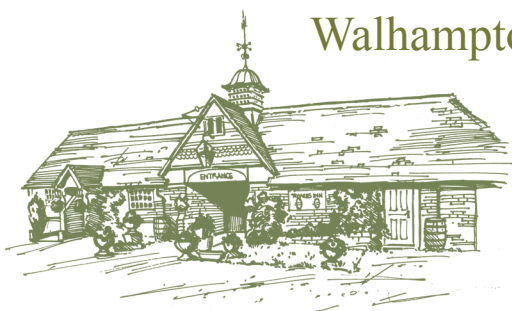


The
Walhampton Arms



THANK YOU FOR YOUR CUSTOM.
TO SHOW OUR APPRECIATION, WE
WOULD LIKE TO INVITE YOU TO
APPLY FOR OUR

LOYALTY CARD

Please complete the details on the
reverse of this Application Form. Hand it
to a member of staff, who will issue your
Loyalty Card

(The information that you provide will only be
used to administer this Loyalty Scheme)

One application per household

APPLICATION FORM

Title _____

Name (Please print full FIRST and LAST NAME)

Address (Please print)

Postcode _____

(Without a Postcode we can't accept your application)

Date of Birth ____ **Day** ____ **Month** ____ **Year**

(If you leave the year blank, you'll be 21 forever)

Telephone number

Email

Card No Issued

Issued by

Date