

THE GENERAL CONFERENCE OF THE NEW CHURCH 219th ANNUAL MEETING: 28th JULY – 31st JULY 2026

BOOKING FORM FOR THOSE WHO ARE BRINGING CHILDREN**CHILD MEANS THOSE AGED 16 AND UNDER AT THE TIME OF CONFERENCE UP TO THE END OF THE SCHOOL YEAR IN WHICH AGE 16 IS REACHED**One form should be completed in **BLOCK CAPITALS** for **EACH FAMILY** attending.

ADULT ONE	ADULT TWO
SURNAME: _____	_____
Christian Names: _____	_____
Title: _____	_____

CHILD ONE	CHILD TWO
Full Name: _____	_____
Date of Birth: ____/____/____	____/____/____
Age at time of Conference: ____ Years	____ Years

Address: _____ Post Code: _____

Telephone: _____ EMAIL: _____

NAME OF SOCIETY OR GROUP _____

Nights for which you wish to be accommodated (Please tick as necessary)

	First Adult	Second Adult	Child 1	Child 2
Monday 27th July	☐	☐	☐	☐
Tuesday 28th July	☐	☐	☐	☐
Wednesday 29th July	☐	☐	☐	☐
Thursday 30th July	☐	☐	☐	☐

For anyone not staying for the whole period of Conference, please clearly state the person's name and the first and last meals required. _____

FEES & SUBSIDIES

The General Conference is committed to supporting families. To encourage attendance, we heavily subsidise the actual cost of the event (£321.00 per adult and £114.00 per child).

The rates below are the subsidised prices you pay:

Attendee Type	Tue 28th – Fri 31st	Monday 27th (Extra)
Adults (Bringing Children)	£160.50	£53.50
Children (Under 16)	FREE	£19.50

Please tick the box if you require lunch on the Tuesday 28th July at an additional charge of **£18.00** ☐**ROOMS REQUIRED: Please tick requirements.**

Level access from Conference Hall	Essential ☐	Preferred ☐	Any floor ☐
Wheelchair accessible ☐	Family Room ☐	Double room to share ☐	Cot ☐ Folding Z bed ☐

ADDITIONAL REQUIREMENTS : Please tick if required.Vegetarian ☐ Vegan ☐ Gluten Free ☐ **OR** Other Requirements ☐ (please state clearly below)* If you require a packed lunch on Friday 31st July instead of a hot meal, please tick box ☐

* Please give details below of any additional equipment required at Conference (displays, tables, audio visual)

PLEASE TICK APPROPRIATE BOX TO INDICATE THE CAPACITY IN WHICH YOU ARE ATTENDING

If you fall into more than one category, tick only the one that appears highest on the list.

If you are not a member of Conference you are a visitor, even if you are a member of a Society or Group.

(This information is needed in connection with voting rights.)

ADULT ONE ADULT TWO

A Conference Ordained Minister	☐	☐
A Voting Member of the Council	☐	☐
An Area Representative	☐	☐
A Society or Group Representative	☐	☐
A Society Member of Conference who is <u>NOT</u> a representative.	☐	☐
A Member who is on the Central Register	☐	☐
An employee who is required to attend.	☐	☐
A Visitor	☐	☐

If you are unable to tick any box, please give details of the capacity in which you are attending.**Completed booking forms** should be returned, **no later than Friday 1ST May 2026**, to Company Secretary, Purley Chase Centre, Purley Chase Lane, Nr Mancetter, Atherstone, CV9 2RQ**Payments** should either be made by cheque made payable to 'The General Conference of the New Church' or into Conference's Santander bank account number 10899348 sort code 090222, quoting reference AGM and your name. The cost of lunch on Tuesday 22nd should be included in your payment where applicable.

Conference will meet all costs to the amount of	£
Total Costs for attending Conference.	£
Plus Donation	£
TOTAL	£

I can confirm I am paying by cheque which is enclosed. ☐**I can confirm I have paid directly into Conference's bank account.** ☐ **Date Paid:** ____/____/____

I wish my donation shown above to be a Gift Aid donation to the General Conference of the New Church. I confirm that I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year (6 April to 5 April) that is at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs (CASCs) that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand that the charity will reclaim 25p of tax on every £1 that I donate. I also wish all future donations I may make to be Gift Aid donations.

Signed: _____ **Date:** ____/____/____**Important:** Please tick ☐ I confirm that I am returning a signed photo/video consent form for **each member of the family** including children and returning along with the booking form

This section should be completed by the booking officer:

DATE OF RECEIPT FOR VOTING PURPOSES:

(If the form is sent by post this will be the actual date of receipt. If it is received by hand this will be the day after the date of receipt.)