



SOVEREIGN CARAVAN CLUB RALLY BOOKING FORM

WE WOULD LIKE TO ATTEND THE..... RALLY
NAME.....
ADDRESS.....
TELEPHONE NUMBER.....
EMAIL.....
MEMBERSHIP NO..... CAR REG..... TYPE OF UNIT.....
NUMBER OF ADULTS..... CHILDREN UNDER 16.....
WE HOPE TO ARRIVE ON..... AT.....
NUMBER OF NIGHTS.....
SOCIAL ADULTS..... CHILDREN.....
IS THIS YOUR FIRST RALLY Y / N
RALLIES START AT STATED TIME DO NOT ARRIVE EARLIER
RALLY PLAQUE WANTED Y/N

I AGREE TO PAY ALL MONEY DUE.

SIGNED.....



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