## SCHOOL OF ROCK GILLIAN LYNNE THEATRE

## PLEASE FILL OUT THE FORM BELOW AND RETURN BY <br> EMAIL TO HOSPITALITY@LWTHEATRES.CO.UK

Performance $\qquad$
Date
Matinee Evening Please Booking Name
Telephone Booking Ref

Please tick box
Stalls $\square$ Circle $\square$ Seat Row \& No.
PLEASE PROVIDE ONE SEAT AS THIS WILL BE THE LOCATION YOUR ICE CREAMS ARE DELIVERED TO PLEASE NOTE WE CAN ONLY TAKE BOOKINGS FOR 10 OR MORE PEOPLE

| Product | Price | Quantity | Total Cost |
| :--- | :---: | :---: | :---: |
| Single Products |  |  |  |
| Marshfield's Ice Cream Tub (125ml) | $£ 4.00$ |  |  |
| Water (still/sparkling 500mI) | $£ 2.60$ |  |  |
| Soft drinks: Fruit Shoot | $£ 2.50$ |  |  |
| Soft drinks: sugar free | $£ 3.10$ |  |  |
| Soft drinks: normal | $£ 3.30$ |  |  |
| Fruit Pops: Orange Crush |  |  |  |
| Fruit Pops: Blackcurrent Crush |  | $£ 3.00$ |  |
| School of Rock Programme | $£ 3.00$ |  |  |
| Combined Offers | $£ 5.00$ |  |  |
| Ice Cream \& Soft Drink (A saving of up to $£ 2.80$ pp*) |  |  |  |
| Programme \& Soft Drink (A saving of up to $£ 1.80$ pp*) | $£ 4.50$ |  |  |
| Programme \& Ice Cream (A saving of up to $£ 2.00$ pp*) | $£ 6.50$ |  |  |
| Programme, Ice Cream \& Soft Drink (A saving of up to $\left.£ 3.80 ~ p p^{*}\right)$ | $£ 8.50$ |  |  |
|  |  | Total | $£$ |

* Per person
${ }^{\dagger}$ Not available as part of a combined offer

| Ice Cream options | Quantity |
| :--- | :--- |
| Vanilla Clotted Cream |  |
| Chocolate Heaven |  |
| Strawberries in Clotted Cream |  |
| Mint Choc Chip |  |
| Soft Drink options |  |
| Still Water (500ml) |  |
| Sparkling Water (500ml) |  |
| Coca Cola (500ml) |  |
| Diet Coke (500ml) |  |
| Fruit Shoot (275ml) Orange |  |
| Fruit Shoot $(275 \mathrm{ml})$ Blackcurrant |  |
| Sprite (500ml) |  |

## PAYMENT DETAILS

PLEASE NOTE THAT UNTIL CREDIT CARD PAYMENT, BACS TRANSFER, OR CHEQUE PAYMENTS HAVE BEEN RECEIVED AND CLEARED IN OUR OFFICE, AN ORDER CANNOT BE PROVIDED ON THE DAY OF THE PERFORMANCE

INVOICE (PLEASE PROVIDE THE FOLLOWING DETAILS IN ORDER FOR US TO RAISE AN INVOICE - MUST BE AT LEAST 7 DAYS IN ADVANCE OF PERFORMANCE)

Company Name $\qquad$
Address $\qquad$

FAO Name
Contact No.
Email Address
CREDIT CARD (PLEASE CALL OUR OFFICE ON 02073794981 TO MAKE A CREDIT CARD PAYMENT)

