



The Old Vicarage School's 75th Anniversary

Pride Park Stadium

Derby County Football Club Stadium, Pride Park, Derby

The Pedigree Suite

Dress: Black Tie 18 years & over

Saturday 3rd May 2008 @ £42.00 each guest



Arrive Reception Drinks 7.00 pm Seated 7.30 pm Carriages 1.00 pm

Delicious Dinner Menu

Tomato & roasted red pepper soup topped with green pesto croutons

Chicken Gremolata: Supreme Chicken marinated with fresh garden herbs, garlic & lemon

Vegetarian Option: delicious Mediterranean Vegetables & Goat's Cheese stack with a tomato & sweet pepper sauce

All served with vegetables and potatoes

White Chocolate Truffle Torte Garnished with Raspberries & drizzled with a duo of Chocolate Sauce

Tea or Coffee ... & ... Dinner Mints

Fabulous D.J. Live 5 Piece Band ' Dexter ' five young men, outstanding professional musicians

* EACH TABLE SEATS UP TO 10 GUESTS MAXIMUM — YOU CAN BOOK MORE THAN ONE TABLE *

PLEASE RETURN YOUR BOOKING FORM AS SOON AS POSSIBLE (Please Print off this booking form)

POSTAL APPLICATIONS PLEASE ADDRESS:-

OVS 75th, The Old Vicarage School, 11 Church Lane, DARLEY ABBEY, Derby. DE22 1EW

(No email applications accepted) OR BY HAND:- applications may also be delivered by hand to school

Enquiries please contact OVS Office:-

telephone — 01332 557130 — or email — office@oldvicarageschool.co.uk

THE MAIN CONTACT

Please write your name as — guest 1 — and then the names of any other guest up to — 9 others guests — and post to the postal application address above with full payment for each guest. Alternatively applications may be delivered by hand.

Guests named below should not complete a form but assist the Main Contact by handing them your full payment.

Booking forms with less than 10 guests we join with others in the same position, who are always happy for this, to make all tables 10 guests and everyone feels very welcome and relaxed

Please make cheques payable to:- ' The Old Vicarage School ' - with today's date for £42.00 each guest

FULL NAME OF MAIN CONTACT

BLOCKED CAPITALS PLEASE IN BLACK, RED OR GREEN INK

IF VEGETARIAN MEAL REQUIRED * PLEASE TICK BELOW HERE

HOME TELEPHONE NO.

MOBILE TELEPHONE NO.

EMAIL ADDRESS

MAIN CONTACT Full Name guest 1

Full name of guest 2

Full name of guest 3

Full name of guest 4

Full name of guest 5

Full name of guest 6

Full name of guest 7

Full name of guest 8

Full name of guest 9

Full name of guest 10

Any special dietary requirements, please write guests name & requirement on the back of this sheet or put a note in