# SOUTH WALES PILGRIMAGE TO THE SHRINE OF OUR LADY OF WALSINGHAM

## Monday July 22 – Thursday 25, 2024 Booking Form

| Please | leave | blank |  |
|--------|-------|-------|--|

| Parish/Group (if applicable) | Organiser's Name |
|------------------------------|------------------|
| Address of Organiser         |                  |
| Addiess of Organiser         |                  |
|                              | Postcode         |
|                              |                  |
| Telephone                    | E- mail          |

### **Important Notes**

Before completing the form overleaf please read these notes carefully.

Names: Many pilgrims will have to share. It is helpful if you are able to bracket those willing to share in groups of twos, threes and fours.

Age: Please indicate the age, especially if under 16 years. It is particularly helpful sometimes to know some people's ages when allocating appropriate accommodation.

**Diet:** Indicate Vegetarian or other dietary requirements or food allergies

Requirements: Please indicate specific needs for accommodation according to genuine need. For example, wheelchair, disability, en-suite, ground floor. The number of single, ground

floor, disabled and en-suite rooms are limited and are allocated to those with genuine and particular need. Some rooms are accessible by lifts.

Ministry: Please indicate if pilgrims are willing to serve, read (in Welsh or English) or sing.

**OT:** Please indicate if pilgrims are providing their own transport.

First Time: please indicate if the person is making their pilgrimage to Walsingham for the first time by writing FT

£: Please complete the amount paid for each pilgrim (either a non-returnable deposit of £20 or part or full amount).

Please do not return the form without all the deposits for all the pilgrims. Cheques made payable to LDWP or Llandaff Diocesan Walsingham Pilgrimage

BACS details: Account Name: Llandaff Diocesan Walsingham Pilgrimage / Account Number: 23198562 Sort Code: 80-22-60

#### Cost

**Accommodation, Meals and Transport:** £390 (£290 for those aged 5 - 16 years\*) **Accommodation and Meals only:** £275 (£165 for those aged 5 - 16 years\*)

\*Please Note that the Shrine Tariff only provides reductions for those aged 16 years and under

Children under the age of 5 yrs: FREE

Full payment is due by July 1, 2024

(Cancellation Policy: If cancellation is made 3 weeks before departure then a full refund of the balance can be made. If cancellation is made 2 weeks before departure then 50% of the balance can be returned. If cancellation is made within seven days of the pilgrimage, then we cannot guarantee if any of the balance can be returned. Please do inform the pilgrims in your group of this policy. You may want to encourage your pilgrims to take out their own travel insurance).

Please return completed form and deposits to: Fr Dean Atkins St Mary's Vicarage, 2 North Church Street, Cardiff CF10 5HB (Please note: we operate on a first come, first served basis)

## Name of Parish, Group or Individual:

IMPORTANT: Please read the notes on the front page before completing this form - and use each line for subsequent pilgrims.

|    | Title |      | Surname | Age | Diet | re completing this form - and use each line for sub<br>Special Requirements for Accommodation | Liturgical<br>Ministry | Own<br>Transport | First Time<br>Pilgrim | £  |
|----|-------|------|---------|-----|------|---|------------------------|------------------|-----------------------|----|
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| 3  |       |      |         |     |      |   |                        |                  |                       |    |
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| 5  |       |      |         |     |      |   |                        |                  |                       |    |
| 5  |       |      |         |     |      |   |                        |                  |                       |    |
| 7  |       |      |         |     |      |   |                        |                  |                       |    |
| 3  |       |      |         |     |      |   |                        |                  |                       |    |
| 9  |       |      |         |     |      |   |                        |                  |                       |    |
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| 12 |       |      |         |     |      |   |                        |                  |                       |    |
| 13 |       |      |         |     |      |   |                        |                  |                       |    |
| 14 |       |      |         |     |      |   |                        |                  |                       |    |
| 15 |       |      |         |     |      |   |                        |                  |                       |    |
| 16 |       |      |         |     |      |   |                        |                  |                       |    |
| 7  |       |      |         |     |      |   |                        |                  |                       |    |
| 18 |       |      |         |     |      |   |                        |                  |                       |    |
| 9  |       |      |         |     |      |   |                        |                  |                       |    |
| 20 |       |      |         |     |      |   |                        |                  |                       |    |

PLEASE ADD ANY ADDITIONAL INFORMATION WHICH YOU THINK MAY BE USEFUL ON A SEPARATE SHEET