



# CARE OF POLICE SURVIVORS (COPS)

'Rebuilding Shattered Lives'

## Survivor Weekend 2018 booking form

**Please complete this form and return as soon as possible and no later than Friday 18<sup>th</sup> May 2018.**

To complete online, please visit <http://www.ukcops.org/docs.php> and choose Survivor Weekend Booking Form 2018, then return via email to: [admin@ukcops.org](mailto:admin@ukcops.org)

**OR** complete in writing and return to:

Care of Police Survivors, Curborough Hall Farm, Watery Lane, Staffordshire, WS13 8ES

**OR** complete, scan and email to email [admin@ukcops.org](mailto:admin@ukcops.org)

Your Name (Lead Guest)			
Your officer's name			
Your officer's force			
Your relationship to your officer			
Your address			
Phone		Mobile	
Email			
Do you have any special dietary requirements? <i>(please list)</i>			
Do you have any additional access needs? <i>(please give details)</i>			

Attending <b>Sunday Service only</b> (if 'Yes' there is no need to complete rest of form – please circle and send back this form only)	Yes	No
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Do you require coach transport from Glasgow?	Yes	No
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**If you wish to attend Friday and Saturday, please also complete the room booking information overleaf.**

If you need additional forms, please visit <http://www.ukcops.org/docs.php> and choose Survivor Weekend Booking Form 2018 or contact the COPS office at [admin@ukcops.org](mailto:admin@ukcops.org) or 01543 410790.

Supporting the families of police officers who lost their lives on duty – [www.ukcops.org](http://www.ukcops.org) T:01543 410790

Patron: Sir Keith Povey QPM BA -Registered Charity No 1170760 Scottish Charity No SC038541



**Please return all information ASAP but no later than Friday 18<sup>th</sup> May 2018.**

If you have any queries, please contact the COPS Office at [admin@ukcops.org](mailto:admin@ukcops.org) or 01543 410 790.

### Room 1

Preferred Room Type		Single		Double		Family		Twin
Nights you will stay		Friday		Saturday				
Who will be staying in this room? <i>(please list all names)</i>								
Name:				Name:				
DOB (21 and under):				DOB (21 and under):				
Relationship to officer:				Relationship to officer:				
Name:				Name:				
DOB (21 and under):				DOB (21 and under):				
Relationship to officer:				Relationship to officer:				
Please list any additional needs and special dietary requirements for these guests and we will endeavour to fulfil them where possible <i>(e.g. cot, adjoining rooms, wheelchair access)</i>								

### Room 2

Preferred Room Type		Single		Double		Family		Twin
Nights you will stay		Friday		Saturday				
Who will be staying in this room? <i>(please list all names)</i>								
Name:				Name:				
DOB (21 and under):				DOB (21 and under):				
Relationship to officer:				Relationship to officer:				
Name:				Name:				
DOB (21 and under):				DOB (21 and under):				
Relationship to officer:				Relationship to officer:				
Please list any additional needs and special dietary requirements for these guests and we will endeavour to fulfil them where possible <i>(e.g. cot, adjoining rooms, wheelchair access)</i>								