**BOSTON SPA VILLAGE HALL BOOKING INVOICE**

**Registered charity No. 523496**

Payment required within 7 days of invoice being received

|  |  |
| --- | --- |
| **Name** |  |
| **Booking reference**  (Please use this reference when paying, so we can identify you) |  |
| **Amount due** |  |

Cheques made payable to: **Boston Spa Village Hall**

Or by bank transfer to:

**HSBC**

**Sort code: 40-46-21**

**Account no: 61325760**

(Please include the booking reference displayed above so we can identify you)

Send to:

Mrs. A Hovell

Lowstones

Clifford Road

Boston Spa

LS23 6DB