

# BOOKING FORM

I wish to book \_\_\_ place/s for **the Histories of Home SSN Engaging Audiences Conference.**

Name
Job title
Organisation/Institution
Address
Postcode
Daytime tel. no.
Email
Do you have any special dietary or access requirements? Please give details:



HISTORIES  
OF HOME

I enclose payment of £\_\_\_\_\_ by

**Cheque** (made payable to 'The Geffrye Museum')

**Credit/debit card** (please circle)

Card type:

Credit/debit card number:

Name on card:

Cardholder address:

Start date:

Expiry date:

Issue no (Switch/Solo only):

Security code (3 digits on back of card):

Date:

Please return the completed form by  
**Monday 15 February 2010** to:

Krisztina Lackoi, SSN Co-ordinator  
Geffrye Museum, Kingsland Road,  
London, E2 8EA  
klackoi@geffrye-museum.org.uk  
Fax: 0207 729 564

Please tick if you would like to receive information on future SSN events