# *Santa Pod Racers Club*

**Invite you to the**

**SPRC DINNER DANCE TROPHY PRESENTATION EVENING**

**To be held at**

**STAVERTON PARK HOTEL, DAVENTRY, NORTHANTS**

**On Saturday, 11th February 2017**

**Pre-Dinner Drinks 5.30pm**

**Trophy Presentation starts at 6.00pm PROMPT**

**Dinner at 7.00pm**

Anyone attending the Dinner Dance and requires accommodation will have to telephone the Staverton Park Hotel on 01327 302002 (Fax: 01327 310283) and ask for 'Reservations' giving Booking Ref. SANT110216. Room prices are, including breakfast, £85 for single, £95 for either double or twin. **YOU ARE RESPONSIBLE FOR BOOKING YOUR OWN HOTEL ARRANGEMENTS.**

**----------Please keep top half of this page and post back bottom half----------**

**MENU**

You have a choice of between two items per course from the Menu provided below. Please ensure you complete the form correctly, i.e. if 2 people request the same starter for instance, then please put '2' in the relevant box and so on.

**THIS SECTION MUST BE COMPLETED:**

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| RED ONION & GOATS CHEESE TART WITH CRANBERRY DRESSING | ☐ | OR | SPINACH & POTATO SOUP WITH SALT & PEPPER CROUTONS | ☐ |
| FRESH SALMON FILLET, ROASTED PEPPERS & COURGETTES, CAPER AND DILL VINAIGRETTE | ☐ | OR | PRESSED BELLY OF PORK, DAUPHINOISE POTATOES, BRAISED RED CABBAGE, PORT JUS | ☐ |
| MEDITERRANEAN VEGETABLE LASAGNE, GARLIC BUTTER SLICES, GREEN SALAD | ☐ | OR | MUSHROOM & LEEK RISOTTO, MIXED GARDEN SALAD | ☐ |
| TANGY LEMON TART WITH LIME CREAM | ☐ | OR | DOUBLE CHOCOLATE GATEAUX | ☐ |

COFFEE/TEA & MINTS

Ticket Price: £35 each (Children 12 & under £20/ticket, please choose starter; main course is chicken nuggets and chips; dessert ice cream) Cheques payable to SPRC, please add £1 per ticket if paying by credit card send application to: Yvonne Tramm, 29 West Drive, Highfields Caldecote, Cambridge CB23-7NY. (Email: ytramm@africonnect.com)

Name: _____ E-mail: _____

Address: _____

Postcode: _____ Tel (Work): _____ (Home or Mobile): _____

No. of Tickets required: _____ Amount enclosed: _____

**Please state who you wish to be seated with and we will endeavour to arrange for you**:

Card Number Expiry Date

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Card to be used: **Visa/Visa Debit/MasterCard/American Express**

Last 3 digits on reverse of card** _____ (** must be completed)

If paying by Switch card please advise Issue No. _____ And/or Valid from and Valid to dates _____

**Other information, including tickets, car parking and location will be supplied at a later date**