

TOPSHAM MUSEUM



VICTORIAN PICNIC 3RD JUNE 2010

APPLICATION FORM

I wish my child/ren

Name/s _____

Age/s _____

To attend the Victorian Picnic at Topsham Museum

From 2.15pm to 4.00pm

Parent's or guardian's name _____

Address _____

Tel: _____

Email: _____

Photographs may be taken of groups of children for use in publicity for Topsham Museum.

If you do NOT wish your child to be photographed please sign below.

.....



**Please return form to: Liz Pascoe, Topsham Museum,
25 Strand, Topsham EX3 0AX**

or Email to: museum@topsham.org.uk