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**Madeleine in Brugge – Intake Form**

**Request for the use of Holy Magdalena Church and Rectory**

**Stalijzerstraat 19, Bruges, BELGIUM**

**Send the filled in form to:** **hemelsplan@yot.be**

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| Name of the organisation |  |
| Name of the contact person |  |
| Title of the activity |  |
| Type of activity and a short description about the activity*(concert, conference, meditation, dinner, exhibition, reception, ritual, congress, meeting, memorial, lecture, workshop etc.)* |  |
| E-mail address of contact person |  |
| Mobile Number |  |
| Website  |  |
| Full address of the Organisation/Company |  |
| Full name, title and contact information of the legal representative of the organisation or company (with the authority to sign contracts) |  |
| Date of the planned activity / Desirable dates in order of priority |  |
| Duration of the activity (including preparation, activity itself, dismantling, etc.) Start time:End time: *(if not on the same dates, mention the dates as well)* |  |
| For how many people? |  |
| Do people have to pay for your activity? |  |
| Do you want to make use of the Rectory (with garden)? |  |
| Do you need catering? Yes/No *(Your own catering at our venue is not possible)* |  |
| Any other questions or need more info? |  |
| How or where did you hear about / get to know *Madeleine in Brugge*? |  |