



DOWNING COLLEGE CAMBRIDGE

Postgraduate Matriculation Ceremony and Dinner Form for Part-Time Students Thursday 13 September

Please complete the following details:

Surname:	<input type="text"/>	Forenames:	<input type="text"/>
Preferred Name:	<input type="text"/>	Subject:	<input type="text"/>

Please confirm your attendance below:

Please note, it is essential that this form is returned, even if you will not be attending any of these events

- | | |
|--|---|
| <input type="checkbox"/> Yes , I will be attending the Matriculation Ceremony | <input type="checkbox"/> No , I will not be attending the Matriculation Ceremony |
| <input type="checkbox"/> Yes , I will be attending the Matriculation Dinner | <input type="checkbox"/> No , I will not be attending the Matriculation Dinner |

Special Dietary Requests:

I have no special dietary requirements

Allergy or Allergies:

- Eggs Fish Milk Nuts Shellfish Soya Wheat

Other, please specify:

Diet:

- Halal Kosher Dairy Free
 Pescatarian Vegetarian Vegan Gluten Free

Other, please specify:

Please save this form and send as an email attachment to freshers@dow.cam.ac.uk by **Thursday 30 August 2018**. We regret that it may not be possible to cater for any special dietary requests which are received after this date.

OFFICE USE ONLY

Date Received: