|  |  |
| --- | --- |
| **Name** |            |
| **Gender** | [ ]  Male [ ]  Female |
| **Address** |       |
| **Telephone Number** |       |
| **Email Address** |       |
| **Medical conditions** |  |

**Booking Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Check in date****Guests may arrive from 2 – 5PM** |       | **Check out date****Guests must depart by 10:30am** |       |
| **Reason for your stay** |  |

**Accommodation Request (Shared Houses)**

|  |  |
| --- | --- |
| Single occupancy | [ ]  shared bathroom [ ]  en-suite |
| Double occupancy\* | [ ]  shared bathroom [ ]  en-suite |

***\* Not for couples***

**By completing this form, you agree to Cambridge Muslim College’s terms and conditions for bookings.**

|  |  |
| --- | --- |
| **Date** |  |
| **Signature** |  |

**Send completed form to:
accommodation@cambridgemuslimcollege.ac.uk**