



NATIONAL BLOCK BOOKING SCHEME BOOKING FORM



Contact Details*

→ All correspondence and deliveries will go to this address.

NAME OF ORGANISATION:	
BFFS REGISTRATION NUMBER**:	
CONTACT NAME:	CONTACT POSITION:
CONTACT ADDRESS:	
POSTCODE:	EMAIL:
TELEPHONE:	WEBSITE:

*Please note this information will be made available to any participant in the Block Booking Scheme who needs to know it.

**This is your BFFS membership number.

Booking

Before making a booking please ensure that your organisation has received an email confirming acceptance onto BFFS National Block Booking Scheme.

→ If you would like to book multiple screenings of a single title please list each screening separately.

BOOKING REF*	FILM TITLE	SCREENING DATE	
		PREFERRED	ALTERNATIVE
	1.		
	2.		
	3.		
	4.		
	5.		
	6.		
	7.		
	8.		

*To be provided by BFFS

→ Please continue on an additional form if needed.

→ Please submit your bookings via email to info@bffs.org.uk or post to the address below.

BFFS BLOCK BOOKING SCHEME, UNIT 315 THE WORKSTATION, 15 PATERNOSTER ROW, SHEFFIELD, S1 2BX