

# *A Night In Venice...*

A Masquerade Ball

25th June 7:30pm

York Hall

MSJ Sixth Form Summer Ball

Tickets £40

Contact [shepps@malvernstjames.co.uk](mailto:shepps@malvernstjames.co.uk)



# MALVERN ST JAMES

**Headmistress: Mrs Patricia Woodhouse B Mus (Hons)**

**Re: Summer Ball, Saturday 25 June 2011**

March 2011

Dear Parents/Guardians

The theme for this year's Summer Ball is A Venetian Masquerade. Sixth Form students and their guests, together with parents and staff will enjoy a evening of music, dinner and dancing. For the girls in Upper Sixth this is a particularly special event, as it will be an opportunity to 'say goodbye' and to socialise together for the last time.

There are a limited number of tickets which will be issued on a first come first served basis. Tickets this year cost £40 each. Please find enclosed ticket order form and seating request.

Completed forms should be returned to me or email your request to [shepps@malvernstjames.co.uk](mailto:shepps@malvernstjames.co.uk).

Tickets will be distributed once payment has been received.

Yours sincerely

Mrs S Sheppard  
PA to Rebecca Webb  
Head of Sixth Form



MSJ Summer Ball  
Saturday 25 June 2011

**Ticket Order Form**

Please supply ..... tickets at £40.00 each.

The names of the persons for whom these tickets are being purchased are:

1. Mr/Mrs/Miss .....
2. Mr/Mrs/Miss .....
3. Mr/Mr/Miss .....
4. Mr/Mrs/Miss .....

I enclose a cheque payable to Malvern St James for £ ..... / I\* give permission for the cost of £ .....to be added to my daughter's School bill. \* *Please delete as appropriate.*

Name and address for delivery of tickets:

.....  
 .....  
 .....

Contact telephone number: .....

Please note that once purchased tickets are non refundable

Signature: .....

Date: .....

Daughter's name: .....

House: .....



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**Seating Request Form**

If you have made up your own party, in order to ensure that you are all sitting together, please list the names below (please note that there are **ten only** to a table). Parties of fewer than ten will be amalgamated with other groups.

**If you are making up a full table, please agree your table guests before submitting this form and return only one table plan per table.**

**Name (capitals please)**

1. ....
2. ....
3. ....
4. ....
5. ....
6. ....
7. ....
8. ....
9. ....
10. ....

Please indicate any dietary requirements .....

.....

Please return to Mrs S Sheppard by Monday 2 May 2011,  
[shepps@malvernstjames.co.uk](mailto:shepps@malvernstjames.co.uk)