**A close-up of a logo

Description automatically generated**

**Christmas Day 2023 – Hibernian Community Foundation Referral Form (Deadline 15th Dec 12 pm)**

**Name:**

**Age:**

**Contact Email / Number:**

**Referral Partner (If Applicable):**

**Meal Option (Please Circle)**

* Attendance At Easter Road Stadium 12-2
* Home Delivery (Venue Within 5 Miles Of Easter Road Stadium) – Delivered by 13:30

**Number Of Meals Requested:**

**Please State Any Dietary Requirements Across Meals:**

**Easter Road Meal Attendance**

I can confirm my nominee has a method of transport to get to and from easter Road Stadium if attending in person (Please Sign):

**Home Drop Off**

Address:

Postcode:

Internal Use: Within 5 Mile Radius of Easter Road Stadium: