



**LOWESTOFT SERVICE OF REMEMBRANCE – Sunday 10 November 2024**

**(subject to relevant permissions)**

1. **Name of Individual / Organisation**

**…………………………………………………………………………………………………………………………………………………**

**2 I / We will / will not be attending on Sunday 10 November 2024 at 10.15 am (Claremont Pier) or 10.45 am (The Royal Plain).**

**3 Approximate numbers attending the Remembrance Service …………….**

**4 Will you or a member of your organisation be laying a Wreath? Yes / No.**

**5 Name of individual laying a Wreath. ……………………………………….**

**6 Will you or a member of your organisation be Parading a Standard? Yes / No.**

**Please note: Wreaths can be purchased from: Lord Kitchener Memorial Holiday Centre**

**E-mail Address: ash2865@yahoo.com Telephone: 01502 573564**

**This form should be completed and returned to:**

**Lowestoft Town Council**

**Hamilton House, Battery Green Road, Lowestoft NR32 1DE**

**Email: admin@lowestofttowncouncil.gov.uk**

**Your Contact details:**

**\* Address for future Remembrance Day events….……………………………………………………..………………………..**

**\*Telephone Number:...…………………….. \*E-mail Address ………………….…………………………………………………**

 (This information will only be used in connection with the Annual Service of Remembrance, either to promote events taking

place or to make contact in case of an emergency)