THE SOUTHWELL DIOCESAN GUILD OF CHURCH BELL RINGERS

TO:	Mr I Hasman, BRC_secretary@southwelldg.org.uk Tel: 01636 679105
From:	NameAddress
	Tel email
NAME (OF CHURCH
I wish to (date)	inform you that I intend to inspect / carry out the following works on
Details of	of work:
Supervi	sion:
Note: Super	vision must be by a member of the Guild BRF Committee OR a member of a recognised bellhanging firm.
Persons 1. 2. 3.	who will be present and should be covered under Guild Insurance:
Note: No mo	ore than 3 ringers may be insured at any time unless prior arrangements are made with the Co-ordinator.
(signed)	(date)//_
CONFIR	RMED that the above is covered under the Guild Insurance policy:
(signed)	(date)//_