

Booking Form

Event Details

Title of Event _____

 Date of Event _____
 Company Name _____
 Name of Organiser _____
 Purchase Order No _____

Correspondence

Address _____

 Postcode _____
 Telephone _____
 Fax _____
 Email _____

Start Time _____
 Finish Time _____
 Number of Delegates _____

Do you have a disability or any special needs relevant to this event? Yes No

If so, please provide details of any adjustments you may require?

Invoice Details (if different from above)

Contact Name _____
 Address _____

 Telephone _____
 Fax _____

Rooms Required

(Please mark all required)

- | | |
|---|--|
| <input type="checkbox"/> Conference Suite | <input type="checkbox"/> Oak Room |
| <input type="checkbox"/> Conference Foyer | <input type="checkbox"/> Lounge |
| <input type="checkbox"/> Garden Room | <input type="checkbox"/> Restaurant (main) |
| <input type="checkbox"/> Lawn | <input type="checkbox"/> Restaurant (VDR) |

Seating Layout

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Theatre | <input type="checkbox"/> Cabaret |
| <input type="checkbox"/> Boardroom | <input type="checkbox"/> Classroom |
| <input type="checkbox"/> U-shape | <input type="checkbox"/> Other (specify below) |

Audio-Visual Requirements

- | | |
|---|---|
| <input type="checkbox"/> Data Projector | <input type="checkbox"/> Laptop (£10 per day) |
| <input type="checkbox"/> Flip Chart | <input type="checkbox"/> DVD |
| <input type="checkbox"/> Microphone(s) | <input type="checkbox"/> VHS |
| <input type="checkbox"/> Wi-Fi | |

Catering Requirements

- | | Time |
|--|-------|
| <input type="checkbox"/> Coffee on Arrival | _____ |
| <input type="checkbox"/> Morning Coffee | _____ |
| <input type="checkbox"/> Buffet Lunch | _____ |
| <input type="checkbox"/> Afternoon Coffee | _____ |
| <input type="checkbox"/> Additional Refreshments | _____ |
| <input type="checkbox"/> Wine & Canapés | _____ |

Any Other Requirements / Comments

I / We have read and agree to abide by the rules set out in the Terms and Conditions of Hire.

Signature _____

Name (please print) _____ Date _____