

Function Room Booking Form

Date of Booking ____ / ____ / ____

Type of event: _____

Date of event: _____ Lounge/Function Room _____

Starting Time: _____ Finishing time: _____

Number of Guests _____

Contact Details

Contact Name: _____

Email: _____ Phone #: _____

Address: _____

City: _____ PostCode _____

Payment Details

Non Members £50 room hire / £50 deposit.

Members Free Room Hire £50 deposit

Deposit is non refundable if cancelled within 14 days of event

Payment method:

Cash

Credit/Debit Card

Signature _____

Please tick to confirm you have
received the terms and conditions

Staff Member Signature _____