**Event Booking Form AVD/0**

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| **Event information**  |
| **Company Name:** |  |
| **Contact Name:** |  |
| **Contact Numbers:** |  |
| **Email Address:** |  |
| **Company Address:** |  |
| **Date of Event:** |  |
| **Time of Event:** |  |
| **Duration of Event:** |  |
| **Number of Attendees:**  |  |
| **Type of Function:** |  |

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| **Function Room Information - Seating capacity varies depending on room layout, max capacity is based on theater style** |
|  | Half Day | Full Day |
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| **Room layout - Please see additional room layout examples and maximum capacity information per layout** |
| Theatre |  | Boardroom |  | Round |  | Classroom |  | Other (Please Specify) |  |
| **Equipment Required** |  |  |
| Projector & Screen |  |  |
| Audio |  |  |
| Microphone |  |  |
| Other – Please specify |  |  |

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| **Hire requirements** |
| Hire only |  |
| Refreshments (Tea/Coffee/Water) |  |
| Catered options |  |

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| **Additional Requests/ Special Requirements**  |
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| **Signed** |  | **Date** |  |

All bookings are subject to our standard terms and conditions – Bookings are provisional until we are in receipt of an agreed deposit.