

VENUE HIRE BOOKING FORM

Please complete and return to: secretary@warwickturfclub.com.au

For queries, please contact the Chief Operating Officer Kristen Doyle on 0414 899 854 or via the above email.

| TO BE COMPLETED BY THE HIRER | | | |
|---|--|---|-------------------------------|
| Event Name | | | |
| Name | | | |
| Address | | | |
| Phone | | | |
| Email | | | |
| EVENT DETAILS | | | |
| Date | | | |
| Venue | Members Lounge <input type="checkbox"/> Lyndhurst Pavilion <input type="checkbox"/> Trackside Pavilion <input type="checkbox"/> | | |
| Start Time | Guests Arrival: | Finish Time: Bar will close at 11.30pm for a midnight exit. | |
| Expected Number of Patrons | | | |
| Confirmed Number of Patrons (Required 1 week prior to event) | | | |
| Will there be minors attending? | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| EVENT REQUIREMENTS | | | |
| Entertainment | Live Music <input type="checkbox"/> DJ <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> | | |
| Tables Required | Round (seats 8) _____ Rectangle (seats 6) _____ Rectangle (seats 10) _____ Dry Bars _____ Tablecloths Yes <input type="checkbox"/> No <input type="checkbox"/> | Chairs Required _____ | Plastic _____ Stools _____ |
| PA System Required | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| TV's Required | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| Security Required (over 300 guests) | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| Catering Requirements | Caterer _____ Food Service _____ start time _____ | | |
| Decorating Requirements | Decorator _____ Required set up time _____ | | |
| Special Drink Requirements – not provided on Beverage List | BEER - Bottles <input type="checkbox"/> Cans <input type="checkbox"/> Other _____ Other _____ | | |
| How would you like to pay for beverages? | Bar TAB Yes <input type="checkbox"/> How much? _____ Cash Bar Yes <input type="checkbox"/> | | |

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| | | |
|--|----------------------------------|---|
| If Yes to Bar TAB please select options | Beer, Wine, Softdrink & Water | Yes <input type="checkbox"/> |
| | All products (including Spirits) | Yes <input type="checkbox"/> |
| Will Club be required to set up a Tea/Coffee Station | Yes <input type="checkbox"/> | |
| | No <input type="checkbox"/> | If yes, Urn/Tea/Coffee/Sugar/Milk/Double wall hot cups provided |

PLEASE READ VENUE HIRE TERMS & CONDITIONS BEFORE SIGNING THIS AGREEMENT

By signing this form, I _____ the Hirer agree that I have read and understood the Venue Hire Terms and Conditions and will abide by the conditions set out therein.

Signature _____ Date _____

PAYMENT DETAILS – FULL PAYMENT IS REQUIRED 5 DAYS PRIOR TO YOUR EVENT. A DEPOSIT OF \$200 TO BOOK THE VENUE WILL BE TAKEN ON RECEIPT OF BOOKING. A BOND OF \$300 WILL BE PROCESSED DAY PRIOR TO YOUR EVENT AND RETURNED (IF NO LOSS OR DAMAGE) DAY AFTER YOUR EVENT. TRANSACTIONS WILL BE PROCESSED AUTOMATICALLY VIA DETAILS LISTED BELOW.

CREDIT CARD INFORMATION REQUIRED

VISA OR MASTERCARD

NAME ON CARD _____

CARD NUMBER _____

EXPIRY DATE _____ CVC _____

OFFICE USE ONLY

| | | |
|------------------------|------------------|----------------------|
| Deposit paid: \$ _____ | Date paid: _____ | Receipt #: _____ |
| Balance paid: \$ _____ | Date paid: _____ | Receipt #: _____ |
| Bond paid: \$ _____ | Date paid: _____ | Date Refunded: _____ |