

BOOKING FORM

Name or organisation:			
Address:			
[
Billing name:			
Address (if different):			
Purchase order no. (if ap	plicable):		
Telephone:		Email:	
Type of event:		Date(s) of hire:	
Room required:		Number attending: [
Time required:		PLEASE INCLUDE YOUR	SET UP AND CLEAR UP TIMI
Room charge (per hour):		Total charge: (excluding extras)	
I will/will not be serving alcohol. (If yes you must supply Percy Community Centre with a copy of all necessary legal documentation at least one week before the event.)			
I am authorised to make make known and compl received. I will accept re	y with the Term	s & Conditions of Hire,	a copy of which I have
Signature:		Print name:	

Bookings are not confirmed until the forms have been received and processed by Percy Community Centre. N.B. The deposit will be forfeit upon cancellation of a booking or for any damage to the facilities caused during your visit.

A DEPOSIT OF 50% OF THE TOTAL HIRE CHARGE MAY BE REQUIRED TO SECURE YOUR BOOKING

Pay by BACS (sort code 40-52-40, a/c 00028934) or cheque to Percy Community Centre