

FUNCTION BOOKING FORM

This form must be completed, signed and returned via Fax. 08 9227 1366
or email info@nichebar.com.au



NAME		COMPANY NAME	
RESERVE SIGN (PREFERRED NAME)		DATE OF FUNCTION	
NICHE AREA RESERVED		NUMBER OF GUESTS	
ARRIVAL TIME	7PM	PHONE NUMBER	
EMAIL ADDRESS		MOBILE	
DEPOSIT AMOUNT		BAR TAB REQUIRED (include deposit)	

BAR TAB SPECIFICATIONS (e.g. Domestic Beers, House wine, cash bar etc.)

FOOD PLATTERS REQUIRED (Select Qty and Type Below)	TOTAL COST OF PLATTERS	\$	PLATTER SERVING TIME _____ pm	o/n
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FOOD PLATTERS - SEE MENU FOR FULL DESCRIPTION

CP01 ANTIPASTO \$105		CP08 CANAPÉS \$115		HP04 MIXED SAVOURY \$112	
CP02 COLD MEAT \$105		CP09 CHILLED SEAFOOD \$165		HP06 CHEFS SELECTION \$120	
CP03 TURKISH BREAD \$65		CP10 RIBBON SANDWICHES \$90		HP05 WEDGES BOWL \$15	
CP04 SUSHI \$105		CP11 GOURMET SANDWICHES \$95		HP07 NICHE PLATTER \$100	
CP05 COCKTAIL SUSHI \$120		HP01 PASTRY \$105		DP02 CHEESE PLATTER \$95	
CP06 CHILLED PRAWN \$145		HP02 VEGETARIAN \$105		DP01 TORTES / CHEESECAKE \$85	
CP07 VIETNAMESE \$105		HP03 MEDITERRANEAN \$160		Cake Choice()	

OTHER INFORMATION TO HELP YOU FUNCTION RUN SMOOTHLY

ARE YOU GOING TO BRING A CAKE (Cake Fee \$25)? YES / NO
I REQUIRE EARLY ENTER (Must be pre arranged)
Any other relevant Information to help your Function to run smoothly.

PAYMENT DETAILS	DEPOSIT DUE IMMEDIATELY	DEPOSIT	\$200 for Lounge Bars	\$300 part of Courtyard
NAME ON CARD		TOTAL AMOUNT DUE		Inv #
VISA/MASTER/AMEX #	____ / ____ / ____ / ____	EXP DATE	____ / ____	
AGREEMENT must be signed	I have read all agree to abide by the above set out Terms & Conditions. By returning by email this is considered a signature		Sign	