

FUNCTION BOOKING FORM

This form must be completed, signed and returned via Fax. 9227 1366



NAME		COMPANY NAME	
RESERVE SIGN (PREFERRED NAME)		DATE OF FUNCTION	
NICHE AREA RESERVED		NUMBER OF GUESTS	
ARRIVAL TIME		PHONE/MOBILE NUMBER	
EMAIL ADDRESS		ADDRESS	
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)		PLATTER SERVING TIME	
FOOD PLATTERS - SEE MENU FOR FULL DESCRIPTION - DELETE PLATTERS NOT REQUIRED.			
NICHE HOT PLATTER\$100.00 QTY. A HOT GOURMET PLATTER.....\$95.00 QTY. B AUSSIE HOT PLATTER.....\$110.00 QTY. C ITALIAN PLATTER.....\$95.00 QTY. D ASIAN PLATTER.....\$100.00 QTY. E VEGETARIAN PLATTER.....\$95.00 QTY. F HEALTHY PLATTER\$90.00 QTY. G BUDGET PLATTER\$110.00 QTY. H CAKE/SLICE PLATTER\$65.00 QTY. I LG. CUP CAKE (each).....\$4.00 QTY. J CHEESE PLATTER\$100.00 QTY.		TOTAL COST OF PLATTERS \$	
OTHER INFORMATION TO HELP YOU FUNCTION RUN SMOOTHLY			
ARE YOU GOING TO BRING A CAKE (Cake Fee \$25 TO)? I REQUIRE EARLY ENTER (Must be pre arranged) Any other relevant Information to help your Function to run smoothly.			
PAYMENT DETAILS	<u>DEPOSIT DUE IMMEDIATELY</u>	DEPOSIT	
NAME ON CARD		TOTAL AMOUNT DUE	
VISA/MASTER/AMEX NUMBER.		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:		Date:	
OFFICE USE ONLY		Revised Date	