



WPNSA Facility Hire Booking Form

Thank you for your interest in booking WPNSA for a private function. Before completing this form, please call WPNSA to check availability for requested dates and to agree a deposit. Should you then wish to make a booking, please sign and return this form to us with the agreed deposit. Please make sure all the areas marked provisional are completed, with the estimated dates/numbers and type of room required.

Details of person making the booking:

Name _____ Invoice Address _____

Post Code _____

Contact No. _____ Mobile No. _____

Email Address _____

Principal Booking Details:

Provisional		
Function Date/s		
No. of People/Attendees		
Timings	Arrive	Depart
Equipment Required: PA System, Flipchart, Projector		

Room Details:

(Room Layouts include Banquet, Boardroom, Hollow Square, U-Shape, Theatre and Classroom)

	Max Capacity	Cost	Room Layout
Small Lecture Room	15-20		
Large Lecture Room	70		
Main Function Room	150-200		
Event Hall	350		

Delegate Fee: (If applicable includes Room Hire, Equipment and refreshments)

Delegate Fee Chosen	No. of Delegates	Total Cost

Menu Type: (Only if Delegate fee is not selected)

Please indicate initial menu options, final choices and number will be requested 7 days prior to function.

	Menu Choice	Provisional Number
Banquet Menu Starter No.1		
Banquet Menu Starter No.2		
Banquet Menu Main No.1		
Banquet Menu Main No.2		
Banquet Menu Dessert No.1		
Banquet Menu Dessert No.2		
Finger Buffet		
Cold Buffet		
Hot Buffet		
BBQ Menu		
Extra's		
Extra's		

	Choice	Provisional Number
Coffee/Tea with or without Biscuits		
Mineral Water (Litre Bottle)		
Orange Juice/Apple Juice (Litre Jug)		
Extra's		

Days Agenda:

(Please enter below the agenda for the day. Include as much information as possible i.e. facility access time, refreshment breaks, meal timings)

Please call WPNSA on completion of this form to arrange a provisional booking and agree a deposit, please see booking conditions.

Room Hire Cost/Delegate Fee		
Food Cost		
Drink Cost		
Total Function/Seminar Cost		
Agreed Deposit		

I have read and fully understand the **WPNSA Booking conditions and Regulations** which will be adhered to at all times. Please sign and date below to confirm provisional number on which a function quote will be provided.

Signed		Date	
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