

Weddings / Parties Beverage Packages: Y / N

## TORQUAY SURF LIFE SAVING CLUB INC.

ABN 95 834 027 136 A0002714F

All Correspondance to PO Box 193 Torquay 3228
Administration Ph. (03) 5261 4110 Fax Ph. (03) 5261 4209
Website www.torquayslsc.com.au E-mail info@torquayslsc.com.au

## **VENUE BOOKING FORM**

Cas	sh Bar: Y / N		Bar Tab: Y / N		Budget:	
Ва	r / Beverage Packaç	ges: p	lease leave if no	t app	licable	
Wh	no is Catering /Details:_					
Clu	b Catering: Y/N		Off Site Catering	: Y/N	Access to kitchen: Y / N	
Ca	tering / Kitchen: pl	ease	leave if not appl	icable		
Fin	ish Time:					
Set Up Time (If needed):					Start Time:	
Da	te of event:		to		Attendance:	
De	tails of Booking:					
Pei	rsonal/Business Addres	s:				
Мо	bile:		Email:			
Pei	rson/Organisation:					
	oicing Details:					
Pei	rsonal/Business Addres	s:				
Мо	bile:		Email:			
	rson/Organisation:					
	ntact Details:					
	ease circle which Ro mber Bar	om fo	or Hire: Main Hall			
	om Hire Daily & Half Da	-		3hrs(	max) Accommodation/Facilities	
We	ease circle your eve		•	Birthday/Engagement/Party		
0	TSLSC Member	0 1	Non Member	0	Will become member on booking	



Additional Hire: Includes free delivery and pick up

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O White Cloth Napkins O Table Linen O Seat Covers O Drapes for Walls Tea & Coffee (includes cup, saucer, spoons, sugar bowl, milk jug, coffee plunger, urn) Outside Gas Heater (includes gas) O Table Number Stands Decorations O Hemp Table Runners O Cark Park Space O Ceremony Packages Available Price list for additional hire will be sent on request once venue-booking form is completed. I certify that I have read the terms & conditions and confirm the above information is correct. I understand that I am personally responsible for complying with the said conditions for payment of all hiring charges and damage (if any). I fully understand that in the event of any disputes or differences arising as to the interpretation of these conditions or any matter or thing contained therein, the decision of the Club Committee shall be final and conclusive. Signature:\_\_\_\_\_\_Date:\_\_\_\_\_ Return Booking Form with Deposit/Payment too: functions.tslsc@gmail.com. Payment options and details of hire are highlighted on the Functions Package Booklet Office Use: Functions Director:\_\_\_\_\_Invoice Request Sent: \_\_\_\_ Membership Application Requested:\_\_\_\_\_\_Paid:\_\_\_\_\_ Signed: Date:\_\_\_\_\_