|  |  |
| --- | --- |
| Booking Number: | |
| Invoice Number: | |
| Booked in Diary? | Confirmed in Diary? |
| Deposit Received? | Payment Received? |

**Single Event Booking Form**

|  |  |
| --- | --- |
| **Your Contact Details** | |
| Organisation / Name: | |
| Type *(eg Private, Business, Community, Charity, Parish)*: | |
| Invoicing Address:  Post Code: | Contact Name: |
| Role: |
| Telephone: |
| Mobile: |
| Email: |
| How did you hear about the Trinity Centre? | |
| **Details of the Booking** | |
| Event Date: | Room(s) Required: |
| Start Time: |
| Finish Time: |
| Approximate Attendance: |
| Activity: | |
| Equipment brought by hirer: | |
| Equipment required from Trinity Centre: | |
| Do you require specific furniture / special access arrangements?  Yes *(please detail on Furniture Layout / Special Access Request Form)* / No | |
| **Refreshments** *(please check our menus and price lists)* | |
| Do you require a buffet? Yes *(please fill out a Buffet Request Form)* / No | |
| Do you require teas & coffees? Yes for *(approximate numbers)* / No | |
| Do you require kitchen access for own buffet? Yes / No | |
| Do you require kitchen access for own refreshments? Yes / No | |
| **Your Agreement** | |
| *The information above provides an accurate description of my/our requirements. I confirm that I have read , understood and agree to the Terms and Conditions of Hire. I agree to provide an agreed and non-refundable deposit if applicable.* ***Please make cheques payable to Trinity Centre.*** | |
| Room Hire: | Refreshments: |
| Kitchen Hire: | Trinity Buffet: |
| Total Booking Fee: | Deposit Required: |

**Hirer's Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**