TEAM PARISH OF LOUTH



Booking Number:	
Booked in Diary?	Confirmed in Diary?
Deposit Received?	All Payments Received?

Multiple Event Booking Form (Page 1)

	- 0 - (- 9 -)
Your Cont	act Details
Organisation / Name:	
Type (eg Private, Business, Community, Charity, Paris	h):
Invoicing Address:	Contact Name:
	Role:
	Telephone:
Doct Code:	Mobile:
Post Code:	Email:
How did you hear about the Trinity Centre?	
Details of t	the Booking
First Event Date:	Room(s) Required:
Last Event Date:	
Please provide details of the events on Page 2	
Equipment brought by hirer:	
Equipment required from Trinity Centre:	
Do you require specific furniture / special access arra Yes (please detail on Furniture Layout / Special Access	_
Refreshments (please chec	ck our menus and price lists)
Do you require a buffet? Yes (please fill out a Buffet i	Request Form) / No
Do you require teas & coffees? Yes for (approx	ximate numbers) / No
Do you require kitchen access for own buffet? Yes /	No
Do you require kitchen access for own refreshments?	Yes / No
Your Ag	reement
The information above provides an accurate description of my/our requir Conditions of Hire. I agree to provide an agreed and non-refundable dep	ements. I confirm that I have read, understood and agree to the Terms and osit 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____