

## Conference Facilities Booking Form

Name of Organisation: .....

Address: .....

Contact Name: .....

Telephone No: ..... Mobile: .....

Invoice Address: ..... Email: .....

I require the following facilities (please tick)	AM 8.45—12.45	PM 1.15—5 pm	EVENING 6—9pm
<input type="checkbox"/> Meeting Room (F1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Board Room (G8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Conference Room (G10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Atrium (G7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 24 Hour Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For Date: .....

Do you require any audio visual/presentation equipment or facilities such as lectern, staging, etc.?

If Yes please state .....

What type of room layout do you require? (eg, theatre, banquet, boardroom)

Do you require a buffet? YES / NO If YES, which menu ..... for how many people? .....  
**(Exact numbers for buffet to be confirmed 3 working days beforehand.)** At what time? .....

Do you require teas/coffees? YES / NO If YES, for how many ..... At what time(s)?.....

**A deposit of 10% of the total cost is required to secure the booking, which is non-refundable.**

In the event of cancellation by yourselves the following charges apply:

- Within 2 weeks of event—50% of the room hire cost payable
- Within 1 week of event—75% of the room hire cost payable
- Within 3 days of event—full room hire

Signed: ..... Date: .....

<b>FOR OFFICE USE ONLY</b>	
Amount Room Hire .....	
Booking Entered .....	
Deposit Received .....	
Cafe Notified .....	
Client conf.....	

**Canolfan Gorseinon Centre is managed and run by**  
**The Gorseinon Development Trust**  
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