



BOOKING ENQUIRY FORM

NAME

ADDRESS

CONTACT NUMBER

EMAIL

DATE & TIME OF BOOKING

ACTIVITY OF BOOKING

ROOM REQUESTED

DURATION OF BOOKING

NUMBER OF PEOPLE EXPECTED

LAYOUT PLAN COMPLETED

YES

NO

ADDITIONAL COMMENTS

COSTINGS:

VIEWING DETAILS

EMAILS

VIEWINGS

OFFICE USE

BOOKING DECLINED – REASON:

NAME & DATE