

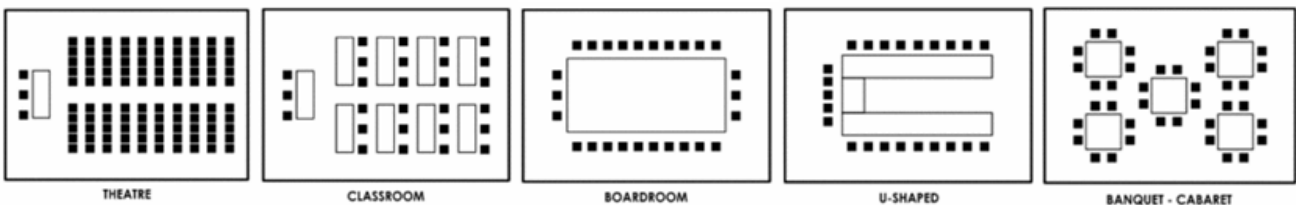
**CONFERENCE
BOOKING FORM 2011**

REQUESTED DATE OF BOOKING:	
PERSON AND OR COMPANY BOOKING FUNCTION:	
INVOICE NAME AND ADDRESS: (Please state where the invoice is to go to)	
ORDER NUMBER	
CO-ORDINATOR ON EVENT DAY:	
TELEPHONE NUMBER:	
MOBILE NUMBER:	
EMAIL ADDRESS:	
NUMBER OF PEOPLE:	
TIME'S OF ROOM HIRE:	

ROOM DETAILS

<i>FUNCTION ROOM</i>	<i>£ PRICE</i>	<i>TICK</i>
WATERSIDE ROOM – Section 1	£76 all day £49 ½ day	
Section 2	£76 all day £49 ½ day	
Whole Room	£174 all day £123½ day	
TOWER ROOM	£102 all day £76 ½ day	
EVENTS ROOM	£91 all day £65 ½ day	
CLASSROOM 1/2	£110 all day £70 ½ day	
ISOBAR PRIVATE	£62 (selected dates only)	
PROSPER ROOM	£91 all day £65 ½ day	
FAMILY ROOM	£79 all day £58 ½ day	
OTHER: please specify –		

LAYOUT – (please circle)



Other Please specify

Booking Notes (Please include any dietary requirements)

EQUIPMENT REQUIRED

EQUIPMENT	£ PRICE	TICK BOX
COMPUTER PROJECTOR UNIT	£52	
TV / VCR / DVD PLAYER	£37	
FLIPCHART AND PENS	£4	
OHP AND SCREEN	Free	
EXTENSION LEADS	Free	
SLIDE PROJECTOR	£30	
FLIP CHART PAD	£5	

CATERING REQUIREMENTS

ITEM	£ PRICE	TIMES	NO. OF PEOPLE
T / C / B	£1.30		
T/fresh filter C/B	£1.60		
T/ C / PASTRY	£2.30		
T / C / MINCE PIES	£2.30		
ORANGE JUICE (approx 8 glasses)	£4.20 per jug		No of Jugs:
PERRIER WATER	£2.60 per bottle (Ltr)		
BACON ROLL	£2.15		
FRUIT BOWL (8 pieces)	£4.20		
PACKED LUNCH	£4.70		
BOSUN'S BUFFET	£7.30		
CAPTAINS BUFFET	£9.90		
ADMIRALS BUFFET	£15.70		
BBQ	£10.75		
JUST SANDWICHES	£4.25		
Own food charge	£50.00		
OTHER (please specify in booking notes)			

How did you hear about the Mount Batten Centre? Existing customer word of mouth/recommend MBC website brochure poster leaflet
advertisement newspaper feature TV, radio Other (Please give details)

I confirm that I am over 18 years old and have read and am signing (or typing my name on an e-mail copy) to accept the terms and conditions of this booking. I understand that this booking is not confirmed until I have received confirmation from the Centre.

SIGNATURE:

(Your typed name in e-mail correspondence confirms your acceptance of our terms and conditions)

NAME (PLEASE PRINT):

DATE:

Please note that if you do not know the particulars of your booking your room cost will be taken as deposit.

If you know the full booking details the deposit will be 25% of the final bill.

If you would like us to invoice you in full please state this in the notes section of this booking form.

OFFICE USE ONLY

PAYMENT RECEIVED NO/s:

INVOICE NO/s: