

TYPE OF FUNCTION

DATE OF FUNCTION

AREA OF FUNCTION

CONTACT NAME

MOBILE NO.

BUSINESS NO.

EMAIL

NO. OF GUESTS

START TIME

COCKTAIL

☐

MEETING

☐

SITDOWN

☐

DEPOSIT AMOUNT PAID & DATE

DEPOSIT ACCOUNT NUMBER

I  HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND THE TERMS AND CONDITIONS OF HIRE FOR THE QUEENS HEAD HOTEL AND AGREE TO BE BOUND BY THESE TERMS AND CONDITIONS.

SIGNED

DATE