

MEETING ROOM BOOKING FORM

Please use this form to obtain a quote and/or make a booking.

COMPANY INFORMATION		
Company Name		
Contact Name		
Postal Address		
Phone #		
Mobile Phone #		
Fax #		
Email Address		
REQUIREMENT DETAILS		
Date/s Required		
Hours Required		
No of Persons		
Room Required (Please Tick)	Boardroom (12 persons)	Meeting room (up to 4 persons)
Equipment Required (Please Tick)	Television	Video / DVD Player
	Data Projector	Laptop
	Whiteboard	Conference Phone
	Camera	Broadband Access
	Other (Please Specify)	
Catering Requirements (Please Tick)	Morning Tea	Lunch - Cold
	Lunch - Hot	Platters
	Beverages	
	Other (Please Specify)	
Cleaning (Please Tick)	Boardroom	Meeting Room
SPECIAL REQUESTS		
(e.g. room layout, unusual equipment, vegetarian food)		