

SPORTS CENTRE DRYSIDE PARTY BOOKING FORM 2016 - 2017

NAME OF GROUP: _____

NAME AND ADDRESS OF PARTY ORGANISER: _____

ADDRESS: _____

POSTCODE: _____ EMAIL ADDRESS: _____

TEL NO HOME: _____ WORK/MOBILE: _____

AREA REQUIRED: e.g. (Sports Hall, Activity Area) _____

TYPE OF PARTY: _____

PARTY ROOM REQUIRED: YES NO

PROBABLE NUMBER ATTENDING: _____

DATE OF PARTY: _____ TIME OF PARTY _____

CHARGING POLICY:

Children's Parties:	
Main Hall per hour	£21.00
Activity Area per hour	£12.00
Café area per hour	£10.00

Total cost of Party - £ _____

Amount paid - £ _____ **Date -** _____ **Signature -** _____

Total Amount paid - £ _____ **Date -** _____ **Signature -** _____

Signature of hirer: _____ **Date:** _____

For Office use only

Confirmed: _____ Date: _____ Booking Number: _____