



BOOKING CONFIRMATION FORM

COMPLETE AND RETURN WITH YOUR
DEPOSIT TO SECURE YOUR DATE

Function date: _____
Contact name: _____
Contact phone numbers: _____
Venue address: _____
Email: _____
Function type: _____
Approximate number of guests attending: _____
Main dining time: _____
Nibbles serving time: _____
How did you find us: _____
Chosen menu: _____
In addition to the menu please highlight any optional extras
required _____

MENU ITEM SELECTION

Meats: _____
Wet dishes: _____
salads: _____
Vegetables: _____
Desserts: _____
Special requirements: _____

**MINIMUM 20% DEPOSIT REQUIRED AT TIME
OF BOOKING TO SECURE YOUR DATE**

BSB: 645646 A/C 105100323 REFERENCE: Booking name
I have read and understand the terms and conditions
Please sign: _____