

GOLSPIE GALLERY ROOM HIRE

BOOKING FORM

Contact details - dates of hire

Name of Hirer/Group	
Address	
Phone No	
Email	
Purpose of hire	
Start date of hire	
End date of hire	
Start time	
Finish time	

Rooms/facilities required

Gallery 2	Yes/No
Access to kitchen	Yes/No
Coffee/tea	AM yes/no PM yes/no
Workshop tables	
Chairs	

Charges and Payment

Total Estimated Fee -as agreed with Gallery	
Deposit Fee 50%	
Balance due date - as agreed with Gallery	
Method of Payment	BACS (preferred) or Cheque
Invoice required?	Yes/No

Signatures

Name of responsible person at event. Please confirm if any DBS checks are required	
Signature (person booking)*	
Date	

*By signing this booking form, you are agreeing to the terms and conditions attached

For office use only