

PORTSIDE FUNCTION ROOM

FUNCTION ENQUIRY FORM

Personal Information

| | | |
|----------------|--------------|---------|
| FULL NAME | PHONE NUMBER | COMPANY |
| POSTAL ADDRESS | EMAIL | |

Event

| | | | |
|----------------|--------------|---------------|---------------|
| TYPE OF EVENT | NO.OF GUESTS | DATE OF EVENT | TIME OF EVENT |
| AREA REQUESTED | ROOM HIRE | ACCOMMODATION | |

Catering

| | | |
|----------------|--------------------|---------------|
| PACKAGE BOOKED | COURSES | PRICE (PP) \$ |
| FOOD EXTRAS | ADDITIONAL DETAILS | |

Beverage Package

STANDARD PACKAGE PREMIUM PACKAGE GUESTS TO PAY THEIR OWN

| | | |
|------------------|---------------------|-------------------|
| TAB LIMIT \$ | BEVERAGE START TIME | BEVERAGE END TIME |
| SPECIAL REQUESTS | | |

Area Hire

| | |
|------------------|-------------------|
| ROOM/AREA BOOKED | AMOUNT APPLICABLE |
|------------------|-------------------|

Deposit & Payments

| | |
|--------------|-----------|
| DEPOSIT PAID | DATE PAID |
|--------------|-----------|

General Comments

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| OFFICE USE ONLY | | | |
|-----------------|---------------|------------------|--------------------|
| TENTATIVE | DEPOSIT & T/C | DATABASE ENTERED | CONFIRMATION EMAIL |
| RUN-SHEET | INVOICE SENT | INVOICE PAID | NUMBERS CONFIRMED |