



# CONFERENCE BOOKING

DATE: \_\_\_\_\_ ETA: \_\_\_\_\_ ETD: \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

COMPANY / GROUP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL: \_\_\_\_\_ NO OF GUESTS \_\_\_\_\_

### EQUIPMENT:

<input type="checkbox"/> DATA PROJECTOR	<input type="checkbox"/> WHITEBOARD	<input type="checkbox"/> OHP
<input type="checkbox"/> SCREEN	<input type="checkbox"/> TELEVISION	<input type="checkbox"/> TABLES
<input type="checkbox"/> POWERBOARDS	<input type="checkbox"/> TABLE SETTINGS	<input type="checkbox"/> LAPTOP

### CATERING:

PACKAGE NO: \_\_\_\_\_ or attach special menu.

TEA/COFFEE/JUICE  ON ARRIVAL  ALL DAY

### TIMINGS

MORNING TEA \_\_\_\_\_ LUNCH \_\_\_\_\_ AFTERNOON TEA \_\_\_\_\_

### ACCOMMODATION

NUMBER OF ROOMS \_\_\_\_\_ TYPE \_\_\_\_\_

COMMENTS / SPECIAL REQUIREMENTS

\_\_\_\_\_  
\_\_\_\_\_

### PAYMENT (Payment on departure is required unless prior arrangements are made)

*Payment Method (please tick or circle)*

Cash    Bankcard    Visa    MasterCard    Diners    Amex    EFTPOS

Name on Card: \_\_\_\_\_

Card Number:

Expiry Date: \_\_\_\_ / \_\_\_\_

Coordinator or Company Rep Signature \_\_\_\_\_

### OFFICE USE ONLY

Enquiry Date	Follow Up	Confirmation