



# Venue Hire Application Form

Please complete this application form and return by post, fax or email (contact details follow). Please read the enclosed Terms and Conditions before completing this form. Please note that your booking is not confirmed until you receive a confirmation letter from the Blue Mountains Botanic Garden, Mount Tomah.

## Applicant Contact Details

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Mobile phone number: \_\_\_\_\_ Daytime phone contact: \_\_\_\_\_

Email address: \_\_\_\_\_

Contact person & phone number on day of function: \_\_\_\_\_

Where did you hear about the Garden as a function venue? \_\_\_\_\_

## Function details

Function day & date: \_\_\_\_\_ Function location: \_\_\_\_\_

Booking start time: \_\_\_\_\_ Booking end time: \_\_\_\_\_ Number of guests: \_\_\_\_\_

Please circle the following as applicable:

Do you require guest transport to your function site? YES/NO

If YES, please provide details: # of guests \_\_\_\_\_ departure time \_\_\_\_\_ return time \_\_\_\_\_

Do you require equipment delivery to your function site? YES/NO

If YES, please advise number of deliveries \_\_\_\_\_

Do you require rubbish removal? YES/NO

If YES, please advise number of bins \_\_\_\_\_

Will you be bringing in any outside suppliers, caterers or equipment? YES/NO

If YES, please list below.

<u>Equipment</u>	<u>Supplier Name</u>	<u>Contact Name &amp; #</u>	<u>Details</u>

N.B. All items being brought into the Garden must receive prior approval from the Functions & Events Coordinator.



# Venue Hire Application Form (continued)

## Acceptance of Terms and Conditions

I have read and agree to the terms and conditions attached to this application and agree to be bound by them.

I understand that failure to comply may result in additional fees for any rectifications required.

Name: \_\_\_\_\_ Date : \_\_\_\_\_

Signature: \_\_\_\_\_

## Payment

Please accept payment of my deposit of \$55 by cash/cheque/credit card/direct deposit (circle as applicable)

MasterCard/Visa Card Details:

Card Number \_\_\_\_\_

Card Expiry Date \_\_\_\_/\_\_\_\_/\_\_\_\_ CCV \_\_\_\_

Name: \_\_\_\_\_ Date : \_\_\_\_\_

Signature: \_\_\_\_\_

## Office Use Only

<u>Item</u>	<u>Unit Cost</u>	<u># of units</u>	<u>Subtotal</u>
Booking location			
After Hours Security Fee			
Rubbish Removal			
Equipment transport			
Guest Transport			
Other			
		<b>TOTAL</b>	
		Deposit	
		Balance Due	

To lodge your application and deposit or for more information, please contact the Functions & Events Coordinator:

Email: [kristen.winder@rbgsyd.nsw.gov.au](mailto:kristen.winder@rbgsyd.nsw.gov.au)

Phone: 4567 3019

Fax: 4567 2037

Post: Functions & Events Coordinator  
The Blue Mountains Botanic Garden  
Bells Line of Rd  
Mount Tomah NSW 2758