

# Conference Suite booking form



Helping Communities Work Together

# nsa

Yn Helpu Cymunedau Gweithio Yngfyd

## Your Details:

Company/Organisation name: \_\_\_\_\_

Full name of person responsible/contact: \_\_\_\_\_

Address for Invoice (incl. postcode): \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

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

Disabled access required?: \_\_\_\_\_

## Event Details

Event Title: \_\_\_\_\_

Purchase order number if required: \_\_\_\_\_

Date(s) of event(s): \_\_\_\_\_

Arrival time: \_\_\_\_\_

Departure time: \_\_\_\_\_

Access required from \_\_\_\_\_ to \_\_\_\_\_

Expected number of delegates: \_\_\_\_\_

## Daily Delegate package:

Full Day    Half Day    Working Lunch

NB Half day indicates upto 3.5 hours

## Catering:

Buffet Required?    Yes    No

NB please complete 'Buffet booking Form' attached

## Audio Visual Equipment:

- Interactive whiteboard
- Laptop
- Flip Chart/Pens
- DVD Player
- Overhead Projector

Video conferencing equipment (Charged at the rate of £20 per half day)

Provisional booking taken by \_\_\_\_\_ Date \_\_\_\_\_

Please keep a copy of this form for your personal records   **Signed:** \_\_\_\_\_

# Work Together

# Meeting Room booking form



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Yn Helpu Cymunedau Gweithio Yngfyd

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Company/Organisation name: \_\_\_\_\_

Full name of person responsible/contact: \_\_\_\_\_

Address for Invoice (incl. postcode): \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

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Disabled access required?: \_\_\_\_\_

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