

BOOKING FORM FOR THE GOTHIC WAREHOUSE

Please fill in as comprehensively as possible to help us ensure all your requirements are met
and return to: VSD2, Cromford Mill, Mill Lane, Cromford, Derbys. DE4 3RQ

Date(s): _____ Day(s) _____

Time access to room required from: _____ Departure Time: _____

Number of people: _____

Wording of sign to direct people on site: _____

Room booked:

Ground floor	Top Floor
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Layout:

Theatre	Boardroom	Custom:
Café	Horseshoe of chairs	

Equipment

OHP	Screen	Flipchart	TV & Video
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<u>Catering</u>	no. required	time/s	
Tea and Coffee			
Orange Juice			
Mineral Water			
Biscuits			

Lunch	no:	time:
Menu: Please tick your choice (1 choice per visit)	Hot Soup Lunch	
	Ploughman's Lunch	
	Lite Bite	
	Buffet Lunch / Supper	
	Hot Potato Lunch / Supper	
Hot Pasta Lunch / Supper		

Special Dietary Requirements:

Charges (excluding vat)

Accommodation

Catering:	Individual Price	Total
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Beverages

Lunch

Others

I have read the booking conditions and agree our organisation shall be bound by them.

Signature

Date

Name in Capitals

Invoice Address

Telephone

Number

Fax Number

*** D.C.C. Only Order Number Please:**