

THE MAWSON CLUB

CAFE • BAR • LOUNGE

Booking Form:

Function name/Company name: _____

Date of Function: / / Expected number of guests: _____

Function start time: _____ Finish time: _____

Function type: _____

Name of function venue: Citrus Cafe Garden Bar Section 57 Blue Note Lounge

Contact name: _____

Contact telephone number: _____ Fax number: _____

Mobile number: _____ Email: _____

Address: _____

Payment

Payment method Cash Credit card EFTPOS Company Cheque

Credit card payments

Credit card type Visa MasterCard Amex Diners

Credit card name: _____

Credit card number: _____ Expiry date: _____

Signature of cardholder: _____

All information remains confidential

I have read and understood the terms and conditions and by signing this document agree to be bound by them.

A completed and signed booking sheet and the deposit are required to confirm all function bookings. The Mawson Club reserves the right to cancel any tentative bookings not confirmed within 10 days. All correspondence can be faxed to 02 6290 1994, attention Functions Coordinator or emailed to functions@mawsonclub.com.au

Signed: _____

Date: _____

Please return this page with the deposit within 48 hours.

