

# HATFIELD TOWN COUNCIL BOOKING FORM

BIRCHWOOD LEISURE CENTRE, LONGMEAD, HATFIELD, HERTS. AL10 0AN (Central Booking Office)  
Tel: 01707 270772/3 Fax: 01707 275119 Email: birchwood@hatfield-herts.gov.uk

**Application To Hire:** **ROE HILL HALL**  **LEMSFORD HALL**  **OXLEASE HOUSE**  **BIRCHWOOD SPORTSMAN**   
 BAR YES/NO BAR YES/NO (NO BAR AVAILABLE) (NO BAR AVAILABLE)

<b>Applicant:</b>		
<b>Organisation/Function:</b>		<b>Number Attending:</b>
<b>Address:</b>		
<b>Tel No (Home):</b>		
<b>Tel No (Work):</b>		<b>Tel No (Mobile):</b>
<b>HIRE:</b>	<b>Day:</b>	<b>Date:</b>
<b>TIME: From:</b>		<b>To:</b>

<u>ROE HILL HALL</u>	<u>LEMSFORD HALL</u>	<u>OXLEASE HOUSE</u>	<u>BIRCHWOOD SPORTSMAN</u>
Function Hire = .....	Function Hire = .....	Hall, Kitchen and Annex	Sportsman
Hall & Room = ..... hrs x £..... = .....	Hall = ..... hrs x £..... = .....	..... hrs x £.....	.....hrs x £.....
Hall = ..... hrs x £..... = .....		= .....	= .....
Room = ..... hrs x £..... = .....			
<b>SUB-TOTAL</b> .....	<b>SUB-TOTAL</b> .....		
<b>PLUS DEPOSIT</b> .....	<b>PLUS DEPOSIT</b> .....		
<b>TOTAL</b> .....	<b>TOTAL</b> .....		

THE DEPOSIT IS PAYABLE AT THE TIME OF BOOKING. YOU WILL BE INVOICED FOR THE TOTAL AMOUNT TWO MONTHS BEFORE THE HIRE DATE. BOOKINGS WITHIN TWO MONTHS MUST BE PAID IN FULL WITH THE DEPOSIT CHEQUES SHOULD BE MADE PAYABLE TO 'HATFIELD TOWN COUNCIL'

MAXIMUM ATTENDANCE - ROE HILL 200 (SIT DOWN MEAL 100) LEMSFORD 120 (SIT DOWN MEAL 75)

OXLEASE HOUSE - MAXIMUM ATTENDANCE 65 - UNLICENSED - NO BAR AVAILABLE

ALL HALLS ARE LOCATED IN A RESIDENTIAL AREA AND MUST BE VACATED WITH MINIMUM NOISE BY 12.00 AM

THE LOUNGE BAR AT ROE HILL HALL AND LEMSFORD HALL IS USED BY SPORTS TEAMS THROUGHOUT THE YEAR

INVOICE ADDRESS (IF DIFFERENT FROM ABOVE): .....

DEPOSIT REFUND ADDRESS (IF DIFFERENT FROM ABOVE): .....

IS THIS BOOKING A SURPRISE EVENT? - YES/NO

IF YES, WHO SHOULD THE INVOICE BE SENT TO? .....

TO HELP US WITH OUR MARKETING PLEASE LET US KNOW HOW YOU FOUND OUT ABOUT THIS HALL?.....

I HAVE READ AND ACCEPT THE HIRE CONDITIONS ON THE REVERSE OF THE GREEN COPY AND APPLY FOR USE OF THE FACILITIES LISTED ABOVE

SIGNED.....DATE .....

NAME .....

-----HATFIELD TOWN COUNCIL Use Only-----

DEPOSIT RECEIVED ..... INVOICE TOTAL .....

(Hall Reference)

INVOICE NO. .... DEPOSIT REFUND .....

(Cheque No.)

HALL MANAGER ..... COMMENTS .....

.....