

# BOOKING FORM

V5/5 P

HIRER			
Name _____			
Address _____			
_____		Landline _____	
_____		Mobile _____	
Post code _____		E mail _____	
YOUR EVENT			PARTY
Date ...../...../.....		Type of event.....	
Times:		Number people in your group .....	
Start .....: .....		Do you need the high gate open Yes/No	
End: .....			
BOOKING CHARGE payable to the treasurer contact on 07532 093743			
Hourly Rate £12.50			
Total Hours required		Total Hire Charge	
DEPOSIT FULL AMOUNT			
Amount	Payment method	Date of Payment	Taken by
Cash		...../...../.....	
Cheque/BAC		...../...../.....	

**We strongly urge you to read the pack as by signing this form you confirm that you have read and understand the *Terms of Conditions of hiring Piccadilly Community Centre.***

Name	PCA Name:
Date	Date:
Signature	Signature: