

CASUAL HALL BOOKING - APPLICATION FORM

Booking Request received from: _____

Address: _____

Contact person: _____

Phone: _____ **Mobile:** _____

Email: _____

Event type:

Event details:

(please describe your event including the expected number of performers and/or estimated number of guests).

Date/s required: _____

Time/s required: _____

Hall/s required (please circle): **Hall 1** **Hall 2** **Hall 3** **Entire Complex**

Specific requirements (if any):

Key collection time: **Date:** _____ **Time:** _____ **am/pm**

Key return time: **Date:** _____ **Time:** _____ **am/pm**

I have read and agreed to the Terms and Condition of Hire:

Applicants Signature: _____ **Date:** _____

NOTE: Booking will be secured on payment of \$100 bond to the following Heritage Bank Account:

A/c Name: Toowoomba Choral Society Inc.

BSB: 638 060

A/c No. 668 8136

Please complete and return this Form to Toowoomba Choral Society via Email or Post to:

Email: leonacar@bigpond.net.au

Postal Address: Toowoomba Choral Society, Po Box 505, Toowoomba Qld, 4350.