



One-Off Let: (please include set-up/clear-up

Children

Under 12

times)

Booking Form

The person filling out this form must take responsibility for the booking and any activities planned.

Contact Details: (Please note that an e-mail address is mandatory for billing purposes) NAME & ADDRESS OF LESSEE: INVOICE DETAILS (IF DIFFERENT FROM LESSEE) Name of Group/Organisation: **Contact Name: Contact Name:** Address: Address: Town: Town: Postcode: Postcode: Telephone No: **Telephone No:** E-mail: E-mail: Type of Let Fortnightly Weekly Monthly Regular Let (Please Tick) **Regular Letting** Start Date of Finish Date of Start Time of Day of Week Finish Time of Let Sessions:(Please give Let Let Let details of dates required & include set-up/clear-up times) Start time Finish time Date Day

Booking Details: (Please ensure you complete all sections)

Booking Details. (Lieuse ensure you complete all sections)				
Nature/Purpose of booking:				
Will music be played?			Please provide licence No:	
If yes, do you have a current PRS licence?			-	
Room/Areas required				
Main Hall, Lounge 1, Lounge 2 or Board Room				
No of chairs, if required:		No of tables, if		
		required:		
Do you require use of kitchen: (please note a charge may be				
applied), If YES, please state purpose:				
Please specify layout of room, if required:				
Do you intend to bring any additional equipment for your				
let? (If yes, please complete an event details form)				
Do you require alcohol to be sold? (If yes, please complete an				
event details form)				
Group Composition (Specify Maximum Numbers)				

All bookings are subject to Take A Bow's Terms and Conditions of Hire. The lessee must sign this Booking Form, the Terms and Conditions of Hire Form and Event Details Form (if applicable).

Adults

Completed forms should be returned to Take A Bow @ London Road. 6A London Road, Kilmarnock, KA3 7AA at your earliest convenience.

Young People

Under 18

Vulnerable

Adults

Signature: Da	te:			
For official use only – staff must confirm/receive th	e following:			
Cost Quoted for Booking	£			
Quotation will be based on the hours specified & addit	ional requests for events.			
Additional costs will be applied if additional hours are used.				
20% deposit paid (if applicable), specify amount received				
Deposit received by:				
Date deposit paid:				
Booking paid in full, amount received	£			
Received by:				
Date received:				
For Events	s only			
Event Details Form completed:				
Event Details Meeting arranged for	//:am/pm			
Please confirm that Terms and Conditions and Event Details Form * have been signed (* if applicable):				
Staff signature:	Date:			