Function Hire Booking Enquiry Information Sheet



There are a number of unique function areas available at Maitland Gaol for your next dinner, corporate training day, product launch or party. Please complete this form with all information that is currently known and update the Maitland Gaol Administration Office as soon as additional information becomes known to ensure we meet your needs and the function runs smoothly. Once this form is received, and final availability is assessed, a Booking Confirmation will be forwarded with the information shown here, together with any required amendments and final fees and charges assessed for the function. To confirm the booking, the hiring agreement must be signed and returned, together with the required deposit.

The staff of Maitland Gaol look forward to hosting your function.

HIRER'S DETAILS:						
Name:						
Address:						
	Town:					Postcode:
Contact Name:						Last Name:
						Mobile:
FUNCTION DETAILS:						
Date(s):						
Area Used:						
Purpose:						
Time:		Start:			Finish: _	
No of Guests:						
EXTERNAL FUNCTION	N SERVIC		ou are welcome	to arrange ca	itering inden	endently or select one of our suggested caterers.
Caterers:	Yes			J		
	Name:				Phone	Contact:
Entertainment:				lo		
	Name:		ш		Phone	Contact:
Other:						
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Please see over for further information and Declaration

Maitland Gaol 6-18 John Street East Maitland NSW 2323 t 02 4936 6482 f 02 4936 6483 info@maitlandgaol.com.au maitlandgaol.com.au ABN 11 596 310 805



GAOL SUPPLIED ADD	ITIONAL FUI	NCTION SERVIC <u>ES</u>	<u>:</u>								
Gaol Tour:	Yes	L	No								
	Туре:			<u>.</u>	Time:						
Room Style:	Room set up style: (theatre, U shape, banquet etc.)										
	Table typ	Table type: (round, trestle etc.)									
Equipment/Services:	Tableclot	ths	Table •	centrepieces							
	White pla	astic chairs									
	Other: _										
GENERAL CONDITIO	NS REQUIRE	MFNTS:									
Time Requests:	TO REQUIRE	Williams.									
Extra Bump-in Time:	Yes	Г	No	No. of Hours:							
Extra Bump-out Time:	Yes	<u> </u>	Include the state of the stat								
		L.	_								
Naked Flame: Candles:	Voc		٦ ٨٠٥	Number							
Other Naked Flame:	Yes Yes		No No								
Other Nakeu Flame.	res	<u></u>	_ 1140	туре		<u> </u>					
Alcohol:		_	_								
Supplied to Patrons:	Yes	<u>_</u>	No								
Sold to Patrons:	Yes	<u>_</u>	No								
Licence Granted:	Yes	L	No		(Copy to	be supplied)					
Security:											
Security Required:	Yes		No								
Arrangements:											
		- · · · · · · · · · · · · · · · · · · ·									
	(Сор	ly of agreement with Seci	urity company	to be supplied or additiona	al charge if arranged by Ma	iltiand Gaoi)					
Insurance:											
Public Liability:	Company:		/ No.: (Copy of policy to b								
					(Copy of policy to t	se suppliea)					
SPECIAL REQUESTS:											
Details:											

Please see over for further information and Declaration

Method: (Select from dropdown list) PAYMENT METHOD: Please indicate your proposed method of payment for this activity. Cash Card Cheque Bank Transfer DECLARATION: I have read, understand and have agreed to comply with all the Conditions and Requirements of Hiring of Maitland Gaol (or part thereof) including any additional conditions. I understand by signing this enquiry request that I am responsible for adhering to and ensuring all attendees adhere to the said terms and conditions and that I am responsible for the event/function in its entirety. Name: Signature: Date: