



RAUNDS TOWN COUNCIL

SAXON HALL

The Hall, Thorpe Street, Raunds, Northants NN9 6LT
Telephone: - (01933) 622087 Fax: (01933) 622622 E-mail:- info@raunds-tc.gov.uk

BOOKING FORM

<u>Organisation / Group / Company:</u>	
Contact Name:	
Address:	Telephone / Mobile No:
	Email:
Post Code:	
Date(s) Required: (Please use attached sheet for block bookings)	
Start Time:	Finish Time:
AM / PM	AM / PM
Accommodation Required: (Please refer to plan enclosed)	
Hall 1 & Terrace <input type="checkbox"/> Hall 2 <input type="checkbox"/> Hall 3 <input type="checkbox"/> Room 2 <input type="checkbox"/> Room 3 <input type="checkbox"/>	
Do you require screens to be removed:	
Hall 1 – 2 <input type="checkbox"/> Hall 2 – 3 <input type="checkbox"/> Hall 1 – 2 – 3 <input type="checkbox"/>	
Do you require use of:	
Kitchen 1 <input type="checkbox"/> Kitchen 2 <input type="checkbox"/> Coffee Bar <input type="checkbox"/> Bar Unit <input type="checkbox"/>	
Wireless Broadband <input type="checkbox"/> Staff Cleaning (Charges apply – see page 3) <input type="checkbox"/>	
Please tick relevant category of hire. (Please refer to page 5)	
Commercial <input type="checkbox"/> Community <input type="checkbox"/> Charity <input type="checkbox"/> Charity Number:	
Under 13's party <input type="checkbox"/> Private Function / Party <input type="checkbox"/> Wedding Reception* <input type="checkbox"/>	
*For a Wedding Reception, please remember to arrange a meeting with the office to discuss your requirements at the time of booking.	
Please tick if any of the following will be involved:	
Bouncy Castle <input type="checkbox"/> Music <input type="checkbox"/> Dancing <input type="checkbox"/> Alcohol <input type="checkbox"/>	
Please advise if at your event you are to: (Please refer to page 8)	
Sell Alcohol <input type="checkbox"/> Provide Alcohol Free of Charge <input type="checkbox"/>	
Approximate number of people attending:	
Number of Chairs required:	Number of Tables required:
Where did you hear about the hiring of the Saxon Hall?	
Please be reminded that a payment is required at the time of booking.	
On signing this booking form you have read and understood the terms and conditions and you are the person responsible for the hiring of Saxon Hall.	
Signed	Print Name
Date	
For office Use Only: Actioned By: Date:	
Diarised: <input type="checkbox"/> Confirmed: <input type="checkbox"/> Invoiced: <input type="checkbox"/> Deposit: <input type="checkbox"/> Paid: <input type="checkbox"/>	

Additional Dates and Information:

For office Use Only: Actioned By: Date:

Diarised: Confirmed: Invoiced: Deposit: Paid: