**Dobbie Hall Booking Form**

No:

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS AND RETURN TO: [info@dobbiehall.co.uk](mailto:info@dobbiehall.co.uk)

Date:

|  |  |  |
| --- | --- | --- |
| **Person responsible for hire:** |  | **Contact 2:** |
| **Name:** |  | **Name:** |
| **Address:** |  | **Address:** |
|  |  |  |
| **Postcode:** |  | **Postcode:** |
| **🕾:** |  | **🕾:** |
| * **:** |  | * **:** |

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| **Event Details** | | | |
| **Type of Event** (eg Meeting, Party etc) | | **Numbers Attending** | |
| Live Band / Disco / Recorded Music | | Any performer/ band/ DJ etc. must have Public Liability Insurance and Pat Testing Certificates and produce a copy | |
| **PPL/PRC Music Licence Held** Please tick | **Yes No** | **Public Liability Insurance held** Please tick | **Yes No** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Hall/room required** | **Start Time**  (include set up) | **Finish**  (include clear up) | **Fee £** |
| **Main Hall** |  |  |  | £ |
| **Lesser Hall** |  |  |  | £ |
| **Lounge** |  |  |  | £ |
| **Committee Room** |  |  |  | £ |
| **Rotary Hall** |  |  |  | £ |
| **Lounge** |  |  |  | £ |

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| --- | --- | --- | --- | --- | --- |
| **Additional Area (s)** ( (please tick if required ) (please tick if required ) | | | | | |
| **Balcony** |  | £ | **Kitchen** \*keep warm only/**Bar** |  | £ |
| **Stage/Dressing rooms** |  | £ | **Lighting** | YES/NO | £ |

|  |  |
| --- | --- |
| **Confirmation of Booking** | |
| The information you supply in this form will only be used for the purposes of processing your booking request and payment. If you are agreeable for your email address to be saved on our distribution list for future contact re events and activities of the Dobbie Hall please tick here We do not share your data with any third parties and you can opt out at any time as detailed on the Privacy notice which forms part of this booking agreement. I understand the Terms and Conditions of Hire and I accept that I will be responsible for ensuring compliance with these conditions. | |
| **Name:** | **Organisation** (if applicable) **:** |
| **Signature:** | **Date:** |

**FOR OFFICIAL USE ONLY**

|  |  |  |  |
| --- | --- | --- | --- |
| Date received : |  | **DEPOSIT** |  |
| Received by: |  | **BALANCE** |  |
| Security Deposit Paid: |  | **TOTAL COST** |  |