

**CITY OF DUBBO TURF CLUB FUNCTION BOOKING SHEET**

**Name:** \_\_\_\_\_

**Type of Function:** \_\_\_\_\_

**No. of Guests:** \_\_\_\_\_ **Type of Music:** \_\_\_\_\_

**Day & Date of Function:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Contact Address:** \_\_\_\_\_

**Daytime Telephone:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**Function Area:** Members Lounge / Betting Ring / Palm Court

**Start Time:** \_\_\_\_\_ **Finish Time:** \_\_\_\_\_

**Drinks on Account:** YES/NO **Paid:** YES/NO **Date:** \_\_\_\_\_ **Receipt:** \_\_\_\_\_ **VALUE:** \_\_\_\_\_

**Drinks on Account:** \_\_\_\_\_

**Caterer Name:** \_\_\_\_\_ **Contact No:** \_\_\_\_\_

**Hire Details:** \_\_\_\_\_ **Contact No:** \_\_\_\_\_

**Payment Details:** Cheque YES / NO      Credit Card YES / NO      Direct Transfer YES / NO  
Number:                                  Visa/M-Card                                  Date of deposit

BSB: 082564  
Account: 874242000

If paying by Direct Deposit, please fax or email details  
of payment to the above number or address!

Deposit of \$100 Paid to secure Booking:	Paid	YES/NO	Date: _____	Receipt: _____
Balance of \$_____ Paid before Function:	Paid	YES/NO	Date: _____	Receipt: _____
Kitchen Hire Bond \$200 – refundable:	Paid	YES/NO	Date: _____	Receipt: _____
Bar Account \$_____ Paid before Function:	Paid	YES/NO	Date: _____	Receipt: _____
Extra Bar Staff X __ @ \$25 X __ hrs:	Paid	YES/NO	Date: _____	Receipt: _____

See cover sheet for details of all expenses relating to function expenses and requirements.

**Please note: NO ALCOHOL IS TO BE BROUGHT INTO OR TAKEN FROM THE TURF CLUB PREMISES.**

I have read and accept the conditions on the function requirements and fees:

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNED: \_\_\_\_\_