BAY 20 BOOKING FORM

Name											
Organisation (if applicable)											
Invoice Address											
Post Code											
Purchase Order No. (if applicable)											
Telephone											
Email					<u>.</u>						
Twitter	Facebook										
How did you hear about u	s?										
Please tick one (if applicable):											
Local Resident			Community Group < 5 paid staff								
Residents Association			Community Group > 5 paid staff								
Statutory Organisation			Commercial Business								
Room Hire (please indicate	which room/s y	ou will	require)								
	om 3 Room		Room 4b	F	Room 4	4a+4b	C	afé Spac	е		
DETAILS OF PERSON RESPONSIBLE OF THE EVENT											
Name											
Telephone/Mobile											
E-mail											
ABOUT THE EVENT											
Date of booking:											
Time required (to include set up and clear up time) Please note that you will not have access to the room prior to or after the times requested.		Set up Start Time:									
		Event Start Time:									
		Event Finish Time:									
		Clear up Finish Time:									
			Total Duration:								
Type of activity/event											
Number of people expected											
Will the event be open to the public?		YES		NO 🗆							
Are you planning to serve alcohol?		YES				NO					

WILL YOU REQUIRE ANY OF THE FOLLOWING?								
Kitchen (Free)	YES	NO 🗆						
Sound System – CD & MP3 (£10)	YES	NO 🗆						
Flipchart & paper (£5)	YES □	NO 🗆						
Projector & Screen (£10)	YES 🗆	NO 🗆						
Number of Tables required (15 available)								
Number of Chairs required (50 available)								
Are you planning to bring any additional equipment/furniture/caterers to the event?	Pleas	e describe:						
I confirm that I am/are over 18 years of age; I have read and understood the hires policy, which accompanies this document. By signing below I agree to comply with the terms and conditions set out in the hires policy.								
Signed	Date							
I am the person who is responsible for co-ordinating and will be present at the event.								
I am the person who is responsible for co-ordinating but will not be present at the event.								
Please note this form is used in conjunction with the Hires Agreement for BAY 20. Only when this agreement is signed will this application become a contract between the Hirer and BAY 20.								
Please return this form completed to:								

Please return this form completed to:

BAY 20 71 St Mark's Road London W10 6JG T: 020 3579 0384

bookings@bay20.org www.bay20.org