



Room Booking Form

Please use black ink and write in BLOCK CAPITALS

Contact Details

Name (Inc. title)		Tel No (day)	
Organisation Name		Tel No (mobile)	
Address	Invoicing Address		
Email			
Purchase Order No:	Payment received by: Cash <input type="checkbox"/> Card <input type="checkbox"/> Date ___/___/___ Taken By: _____ Payment by invoice (as agreed by Safewise) <input type="checkbox"/> Customer Number: _____ All bookings must be paid for at the time of booking unless previously agreed with Safewise.		
Are you booking more than 12 sessions? This will attract a 10% discount			Yes/No
Please nominate a responsible person on the day of the event to liaise with centre staff	Name	Contact Tel No	

Details of room requirements (See room details document for details and session times)

Date (or dates if this is a regular booking, please also state if weekly or monthly)	
Meeting Title	
Room (if known)	
Start & end times (to <u>include</u> set up/packing away)	
Number of people expected (maximum)	
Room layout: (please state - chairs in semi-circle/ rows/classroom/boardroom/other)	
Equipment required: hearing impaired facilities/portable flat screen monitor/staging etc.	

Refreshments and catering. If you require refreshments and/or catering, please request a catering form from reception. Alternatively, you can may choose to bring your own teabags, milk, biscuits etc and use our first floor kitchenette to prepare your own refreshments.

I have read and agree to comply with the standard conditions of hire for the SafeWise Centre.

Signed (or print if emailing)

Date

Please return to: SafeWise Weymouth, 481 Radipole Lane, Weymouth, Dorset, DT4 0QF
or weymouth@safewise.org or Telephone 01722 691507.