



Name of Function/Workshop: \_\_\_\_\_

Date of Function: \_\_\_\_\_

Date Booked: \_\_\_\_\_

Organiser (name of person or company) \_\_\_\_\_

Contact Person \_\_\_\_\_

Billing Address \_\_\_\_\_

Phone # \_\_\_\_\_

Mobile # \_\_\_\_\_

E-mail address \_\_\_\_\_

**Important:**

*\*This booking can only be confirmed once this form is submitted and confirmation is received. Please Fax to 4123 6391 or email to [bookings@maryboroughnc.org](mailto:bookings@maryboroughnc.org).*

*\*Cancellation is **three (3) days prior to function date for room hire and two (2) days for catering or full amount will be invoiced as per this function order.***

*\*For cancellation or change in function order details please complete the form provided below.*

**FUNCTION DETAILS:**

Number of Meeting Room/s required: \_\_\_\_\_ Time (incl. set-up & pack up): start: \_\_\_\_\_ end: \_\_\_\_\_

*(NOTE: A fraction of an hour is charged an equivalent of a full hour)*

No. of participants including facilitator: \_\_\_\_\_ (If # of participant is more than 12 persons, please consider hiring another room.)

**Room Hire Charges:**

- Meeting rooms - Not for profit organisations = \$20.00/room/hour (1 hour use)
- Meeting rooms - Not for Profit organisations = \$15.00/room/hour (2 hours or more)

*(Please provide a copy of your Charity Tax Concession Status if availing our 'not for profit' rate. Thank you.)*

- Meeting rooms - Corporate/business = \$30.00/room/hour (1 hour use)
- Meeting rooms - Corporate/business = \$25.00/room/hour (2 hours or more)
- Meeting room with kitchenette = Not for Profit = \$25/room/hour  
Business = \$30.00/room/hour

Commercial kitchen hire (for community groups only) = \$35.00/hour *(subject to availability - conditions apply)*

COURTYARD HIRE = \$60.00 for 4 hours + \$10.00 per hour after *(an additional fee of \$15.00 applies if you would like it set-up e.g. extra tables, table clothes, table decos etc.)*

AFTER BUSINESS HOURS (5pm – 9pm) = \$60.00 per room + \$10.00 per room per hour after *(\$150.00 refundable bond required. Terms & Conditions apply)*

WEEKEND RATE = \$60.00 per room for 4 hours + \$10.00 per room per hour after *(\$150.00 refundable bond required. Terms & Conditions apply)*

**NOTE TO CLIENTS:**  
 1 x meeting room can only accommodate a maximum of 12-15 people (conference set-up). If unsure of how many rooms you require for your event, please email [bookings@maryboroughnc.org](mailto:bookings@maryboroughnc.org).

**SET-UP DRAWING:**

**Room Set-Up:**  \$10.00       not required

- Classroom (1 x meeting room maximum of 6 people)
- Theatre (1 x meeting room maximum of 15 people)
- Dining/Cabaret (1 x meeting room 2 tables of 6)
- Conference/Meeting (1 x meeting room maximum of 15 people)
- U-shape (requires 2 x meeting room maximum of 20)
- Others \_\_\_\_\_



**EQUIPMENT HIRE: (depending on availability)**

- Stereo/PA system - \$25.00 per day (set-up of PA system not included)
- Whiteboard - \$10.00 per day
- Projector - \$25.00 per day (set-up & projector screen not included)
- Laptop - \$25.00 per day
- Projector Screen - \$10.00 per day
- URN/Kettle - \$10.00 per day

**CATERING REQUIREMENTS: (not available on weekends and after-hours): min. of 10 people**

Catering option#: \_\_\_\_\_ @ \$ \_\_\_\_\_ per person x Total number to be served = \_\_\_\_\_

**Time:** Morning Tea: \_\_\_\_\_ Lunch: \_\_\_\_\_ Afternoon Tea: \_\_\_\_\_

**OR (Please complete this portion for details on number of servings for each meals and service time).**

**Morning Tea:** Option # \_\_\_\_\_

**Time:**  
Total # to be served: \_\_\_\_\_ @ \$ \_\_\_\_\_ p/p

**Lunch:** Option # \_\_\_\_\_

**Time:**  
Total # to be served: \_\_\_\_\_ @ \$ \_\_\_\_\_ p/p

**Afternoon Tea:** Option # \_\_\_\_\_

**Time:**  
Total # to be served: \_\_\_\_\_ @ \$ \_\_\_\_\_ p/p

***Our Catering service is mostly run by volunteers and unfortunately due to the experience required and the cost involved including the risk of contamination in preparing meals for special dietary requirements – WE CAN NO LONGER PROVIDE THIS SERVICE, however we can still offer regular catering options. We may be able to assist with information on caterers in the area who can offer special dietary menus. Please talk to us about this. Thank you for understanding!***

<b><u>Organiser's Confirmation</u></b>	
Name:	_____
Signature:	_____
Date:	_____

***Disclaimer: Signing this Function Order Form will constitute acceptance of the Maryborough Neighbourhood Centre's Conditions of Use and Room Hire Charges and Conditions. A copy of this will be provided upon request.***

Office Use Only	
Room Hire	\$
Room Set-up fee	\$
Meals	\$
Equipment Use	\$
Other charges/Miscellaneous	\$
<b>TOTAL</b>	<b>\$</b>
Prepared By:	Date:
Approved By:	Date:

## Change of Function Order Details/CANCELLATION FORM

**Please use this form for any changes to the original Function Order Form and for any cancellation.  
PLEASE NOTE THAT CANCELLATION MUST BE RECEIVED BY THE OFFICE  
AT LEAST THREE (DAYS) PRIOR TO THE FUNCTION DATE.**

Name of function:	
Organisation:	
DATE OF FUNCTION	
NEW DATE FOR FUNCTION <i>(Complete if applicable.)</i>	

### COMPLETE BELOW FOR DETAILS ON CHANGES:

<b>Room hire:</b>	Date: _____	New charge: \$
	Time: _____	<i>(office use)</i>
	Set-up _____	\$
	Number of rooms _____	<i>(office use)</i>
<b>No of persons for catering</b>		New Charge: \$
		<i>(office use)</i>
<b>Catering Option/s</b>		\$
		<i>(office use)</i>
<b>Other Changes</b>		\$
		<i>(office use)</i>
<b>Changes Submitted by:</b>	Name: _____	Email _____
	Signature: _____	Phone _____

### COMPLETE BELOW FOR DETAILS ON CANCELLATION:

<b>Cancelled By:</b> <i>Please print name and sign.</i>	
<b>Contact of person who cancelled:</b>	<b>Email:</b> _____
	<b>Phone:</b> _____
<b>Date cancelled:</b> <i>date form is submitted.</i>	_____
	<i>(NOTE: Please always get confirmation that this form has been received.)</i>
<b>This form submitted by:</b> <i>(office use)</i>	<input type="checkbox"/> Post <input type="checkbox"/> Email <input type="checkbox"/> Delivered
<b>Cancellation fees incurred:</b> <i>(office use)</i>	

Changes accepted by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by CM: \_\_\_\_\_ Date: \_\_\_\_\_