

SPECTRUM THEATRE BOOKING FORM

Please complete this form and email to jane@spectrumhealthandfitness.co.nz

Client Information		Hire Information		
Company		Date of hire		
Contact		Time In		
Contact on day		Time Out		
Phone		Approx attendees		
Mobile		Set up information		
e-mail		Presenters table req'd	Y/N	Qty chairs
Purchase order #		Registration desk req'd	Y/N	Lobby area
Billing details		Catering req'd	Y/N	If " y " see below
		Audio visual req'd	Y/N	If " y " see below

Catering Information	Y/N
Tea & Coffee \$3 per head	
Orange Juice \$1.70 per head	
Sweet slice/cake \$3 per head	
Time items above are required	

Client caterers name	
Set up time	
Collection & clean up time	
Comments	

Equipment Requirements	
Electronic whiteboard	
Data projector	
Lapel microphone	
Hand held microphone	
PA System	
Other - please specify	

Payment terms: 7 days from date of invoice

Cancellation policy: If you have to cancel your booking please give us as much notice as possible. Cancellations within 48 hours incur a 10% total hire fee and cancellations within 24 hours will incur a 25% total hire fee.