

LOTTERIES HOUSE CONFERENCE ROOM BOOKING FORM

Name of Group:	
1 st Contact Name:	Phone No
2nd Contact Name:	Phone No
Address:	
Suburb:	Post code:
Email:	

ROOM HIRE DETAILS:

ACTIVITY	DAY	DATE	START TIME	END TIME	# PEOPLE

ROOM HIRE FEES:

Non Profit Organisation \$33 per 3 hr block

Private Organisation \$70 per 3 hour block

Tenant (Complimentary)

We hereby apply to hire Lotteries House Conference Room as detailed above. We acknowledge and accept the attached terms and conditions.

REFUNDABLE BOND:

Key \$10.00

KEY NUMBER:.....

DATE:

KEY DEPOSIT RETURNED: \$	
City of Albany Signature:	Date:
Hirer Signature:	Date:

Form to be returned to City of Albany PO Box 484 ALBANY WA 6331 or email <u>customer.services@albany.wa.gov.au</u> Reference: NF1999284