

NORMAN LINDSAY GALLERY AND MUSEUM

FUNCTION BOOKING SHEET

NAME _____
ADDRESS _____
TEL: BH _____ AH _____ Mobile _____ Email _____

TYPE OF FUNCTION _____
DAY AND DATE _____
NO OF GUESTS _____
FUNCTION Starting Time _____ Finishing Time _____

NAME OF HIRING COMPANY (if any) _____

NAME OF CATERING COMPANY (if any) _____

WILL THERE BE ENTERTAINMENT OR MUSIC? _____

SPECIAL REQUIREMENTS

Marquee @ \$100. _____ Chairs @ \$1. _____ Tables @\$5. _____

Extra toilets (Reception for over 80 guests) @ \$150. _____

Parking Assistance (Reception for 80 guests) @\$50. _____

Special Location requirements _____

Agreed gallery viewing time for guests _____

Agreed Venue Hire Fee \$ _____ Agreed Non Refundable Deposit \$ _____

How did you hear about Norman Lindsay Gallery?

Conditions of Hire

- * **WE ARE NOT ALLOWED ANY AMPLIFIED MUSIC.**
- * **STRING TRIOS, QUARTETS AND HARPS ARE ALLOWED.**
- * **ANY DAMAGE TO STATUES, GROUNDS ETC. IS PAYABLE BY THE HIRER.**
- * **ALL RUBBISH IS TO BE REMOVED FROM THE PROPERTY BY THE HIRER**
including bottles, food scraps etc. The grounds are to be left clean & tidy.
 - If alcohol is being served a guest must have a current RSA certificate and this must be produced BEFORE the function day and they must attend the function.

I have read and agree to the above conditions of hire (initials) _____

SIGNED _____ DATE _____

OFFICE USE ONLY

Deposit received ___/___/___ \$ _____ Receipt No _____

Balance received ___/___/___ \$ _____ Receipt No _____

Notes _____

14 Norman Lindsay Cres,
Faulconbridge 2776
Ph: 02 4751 106

