

# WELWYN GARDEN CITY GOLF CLUB



## FUNCTION BOOKING FORM

CONTACT NAME		DATE BOOKED	
TYPE OF FUNCTION		PHONE NUMBER	
ADDRESS		EMAIL ADDRESS	
FUNCTION DETAILS			
NUMBERS EXPECTED		<b>PLEASE NOTE WE REQUIRE FINAL NUMBERS, FOOD CHOICES (WHERE APPLICABLE) AND FINAL PAYMENT 7 DAYS PRIOR TO THE FUNCTION DATE.</b>	
ARRIVAL TIME		DEPARTURE TIME	
DRINK(S) ON ARRIVAL		NUMBER REQUIRED	
BUFFET OPTION	5 Items	7 Items	10 Items
FORK BUFFET OPTION	A	B	DESSERT A OR B
EVENING MEAL OPTION	Starter	Main	Dessert
TIME OF MEAL		DIETARY REQUIREMENTS	
DEPOSIT REQUIRED	<b>£100</b>	DATE DEPOSIT PAID	

DEPOSITS AND FINAL PAYMENTS CAN BE MADE BY EITHER CASH, CARD, CHEQUE OR BACS.

PLEASE MAKE CHEQUES PAYABLE TO **WGCGC LTD**

BANK DETAILS FOR BACS PAYMENTS ARE **Sort Code 20-92-54 Account 80946338**

**PLEASE NOTE ALL APPROVED BAR TABS MUST BE SETTLED ON THE NIGHT**