Name:

**Vale of Leven & District Angling Club**

**Function Suite Booking Form**

 Address:

 Post Code:

 Mobile:

 Email:

 Date of function:

 Type of function:

 Approx. number attending:

 Name of sponsor:

 Date:

Additional Information

* A donation for use of the hall is payable in advance of the function
* The completed form should be emailed to stephen.squires@ymail.com or returned to the Secretary by your sponsor in a sealed envelope
* No liability will be accepted by the club for missing booking forms (E.g. left behind the bar)

**Secretary**

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**Booking Confirmation (to be completed by the Secretary)**

 Booking confirmed (Yes / No):

 Signed:

 Date: