



Booking Form



**PLEASE COMPLETE ALL RELEVANT INFORMATION
CONTACT DETAILS**

NAME: _____

PHONE NUMBER: H _____ **M** _____

EMAIL: _____

POSTAL ADDRESS: _____

_____ **POSTCODE:** _____

HIRE DETAILS

LOCATION OF PARTY: _____
AQUANATION CAFÉ TABLE INSIDE, OUTSIDE OR POOLSIDE

DATE OF PARTY: _____ **RSVP (CATERING PURPOSES)** _____

NUMBER OF CHILDREN AGED 0 - 12YO: _____

NUMBER OF ADULTS: _____

MINIMUM OF 10 ADULTS TO ORDER PLATTERS _____

**DIETARY
REQUIREMENTS/ALLERGIES** _____

BOOKED TIMES: FROM _____ **TO** _____

PREFERRED EATING TIME: _____

BIRTHDAY CHILD'S NAME: _____