



THE SOMERSET HOTEL

# YOUR FUNCTION INFORMATION

NAME OF HOST/ORGANISER

BEVERAGE OPTION

PHONE NUMBER

MINIMUM SPEND

EMAIL

DEPOSIT DUE

FUNCTION DATE

AMOUNT PAID

FUNCTION TIME

DATE PAID

GUEST NUMBERS

PAYMENT STAFF MEMBER/ STAFF TO SIGN

FUNCTION AREA/LOCATION

FUNCTION TYPE

HOST'S SIGNATURE

FUNCTION MANAGER'S SIGNATURE

*I agree to the above terms and conditions*

# Functions

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