

# VENUE HIRE ENQUIRY FORM

Preferred date(s) .....  
.....  
.....

Name(s) of Hirer: .....

Address: .....  
.....

Phone (business hours): .....

Phone (after hours): .....

Fax: .....

Mobile: .....

Email: .....

Function type: .....

Number of guests: .....

How did you hear about us? .....

Other requirements:

Accommodation? (please tick)                      Yes              No              Unsure

If so, how many? (please tick)                      0 - 16              17 - 32              33 - 38

**Please return this form to:**  
admin@bundanon.com.au  
or  
Fax: (02) 4422 7190

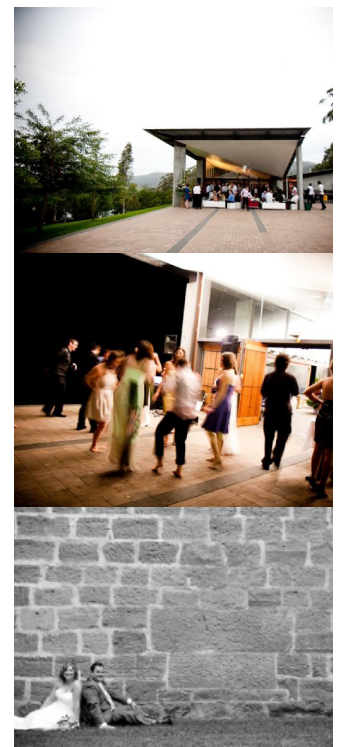


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