

FUNCTION SHEET - TIMARU SOUTH COSMOPOLITAN CLUB INC.



Contact Person: _____

Phone: _____ **Mobile:** _____ **Email:** _____

Date of Function: _____ **Start Time:** _____ **Finish Time:** _____

Type of Function: _____

No's Attending: **Initial Est.** _____ **Final No's Confirmed** _____

Date _____ **Date Of Confirmation** _____

Arrangements:

Seating: _____ **Table Setup:** _____

Arrangement for Tables / Top Table: _____

Tablecloths: **White / Other** _____

Glassware: **Wine / Water / Beer** _____

Flowers: **Arrangements:** **Hall:** _____ **Tables:** _____

Special Arrangements:

Entertainment: *Contract to be completed if the Club is Organising & Paying*

Entertainers: _____

Cost Of Entertainment: \$ _____ **Morning Tea:** _____

Client Paying Half Including Tax/GST: \$ _____ **Lunch:** _____

Food Requirements: _____ **Afternoon Tea:** _____

TOTAL FUNCTION COST: \$ _____ **Dinner:** _____

Bar Details: **Tea:** _____ **Coffee:** _____

Cash Bar _____ **Client Pays - LIMIT \$** _____

Beer _____ **Wine** _____ **Spirits** _____ **RTD's** _____ **Soft Drink** _____

Speaker & Requirements:

Accommodation Requirements: _____

Lectern _____ **Microphone: Lectern / Lapel**

Other Equipment: **Projector / Big Screen / Laptop / DVD / Video** **Whiteboard**