

Web Address: www.functionroomsperth.com.au
Ph: 08 9272 4586 Mobile: 0422 114 482

VENUE DETAILS FORM – 2 PAGES

CONTACT INFORMATION						
		(which will appear on		ge)		
Name of Venue:						
Contact Person:			Phone:			
Email Address:			Web Address:			
Street Address:						
DESCRIPTION OF VENUE – NO LIMIT ON LENGTH						
		ADDITIONAL IN	FORMATION			
Type of Functions: (ie Weddings, Conferences)						
	Monday:					
	Tuesday:					
	Wednesday:					
Function Hours (if applicable):	Thursday:					
, , ,	Friday:					
	Saturday:					
	Saturday: Sunday:					
Free Parking Ava	Sunday:		Disabled Access	s:		
Free Parking Ava	Sunday:		Disabled Access	3: 		
	Sunday:			S:		
Licensed:	Sunday: ilable:		Allow BYO:			
Licensed: Dance Floor:	Sunday: ilable: ng:		Allow BYO: Private Bar: Allow 18th/21s			

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Function Room Details

Please fill in maximum capacity of people for each layout if known

С				Conference Details Only. Please leave blank if your venue does not host conferences					
Name of Function Rooms	Cocktail	Sit Down	Boardroom	Classroom	Theatre	U Shape	Indoor/ Outdoor	General Facilities (ie balcony)	

Please supply the following:	Your Logo and up to	photos		We		•		
		"If you don't have	photos we can us	e generic one	es.			
Size and F	ormat: Please email th	in either jpeg, png or PDF and we can resize them to fit.						
Once we have received the fo	orm and photos, we wi	ill email you straigh	t away to confirm we	have receive	d your detai	ls and yo	our venue's pa	ige will be created
within	hours. If you do not h	ear from us within t	hat time, please ema	ail us to confi	m we have r	eceived	your details.	

Payment: We will email you the invoice with our payment information once you have approved your venue's page and we have added it to the website.

Payment to be made via EFT, cheque or credit card within days.