



QHL Christmas Day 2017

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LIGHTHOUSE

Full name: _____

Booking Name: (if sitting with others) _____

Address: _____

Phone: H _____ M _____

Email: _____

I would like to book for the following meal service:

- | | | | |
|---|----------------|-------------------------|----------------------|
| <input type="checkbox"/> Buffet Breakfast | Adults @ \$40 | Children (4 -12) @ \$20 | Under 4 years @ FREE |
| <input type="checkbox"/> Buffet Lunch | Adults @ \$125 | Children (4 -12) @ \$55 | Under 4 years @ FREE |
| <input type="checkbox"/> Set Menu Lunch | Adults @ \$145 | Children (4 -12) @ \$60 | Under 4 years @ FREE |

Booking Time: _____ Any Dietary Requirements: _____

Number of Adults: _____ @ _____ each = _____

Number of Children: _____ @ _____ each = _____

Age & Gender of Children: _____

(For Santa - not required for Breakfast Bookings)

Total Due = _____

50% Paid Today = _____ & Final payment of _____
will be processed automatically on 01.12.2017

OR Paid in Full = _____

Please charge my:

VISA American Express Diners Card Master Card

Card Number:

Expiry: / CCV:

Card Holder's Name: _____

Card Holder's Signature: _____

PLEASE NOTE: No refunds will be issued unless cancelled in writing 21 days or more prior to the event. Bookings will only be made for the number of guests paid for on this form. Any additional guests must complete an additional form