



# QHL Small Business Christmas 2018

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P: (08) 9781 2700

LIGHTHOUSE

Company Name: \_\_\_\_\_

Organisers Name : \_\_\_\_\_

Business Address: \_\_\_\_\_

Phone: W \_\_\_\_\_ M \_\_\_\_\_

Email: \_\_\_\_\_

I would like to book for the following:

X Single Seats @ \$80 & Happy to sit with others

X Single Seats @ \$80 & Would prefer to be a Private Table or tables depending on numbers

Name & Age of any under 18's: \_\_\_\_\_

Total Due = \_\_\_\_\_

50% Paid Today = \_\_\_\_\_ & Final Payment will be processed on 01/12/2016

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.**

**For additional numbers please complete an additional Booking Form.**