

The Manuels River *experience*
Facility Rentals Booking Information

Client _____	Main Contact Person _____
Address _____	Email Address _____
City, _____	
Province _____	Phone Number _____
Postal Code _____	Fax Number _____

Room(s) Requested

	Reception Hall –Full
	Reception Hall A- Window side
	Reception Hall B- Bar Side
	Discovery Room
	Theatre
	Theatre Extended

Type of Event

	Business Meeting
	Wedding Reception
	Wedding Ceremony
	Dinner Function
	Community Function
	Other:

Agenda Requested

Date of Event (day/month/year)		
Number of Guests		
Guest Arrival Time		
Guest Departure Time		

Seating Requested

	Theatre Seating
	Workshop Seating
	Formal Seating
	Stand-Up Function
	Boardroom table
	U- shaped

Catering Anytime Yes No

	Coffee Matters
Catering Evening Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Coffee Matters
	Red Oak
	A Taste of Class
	Fireside

Bar Service Yes No

	Cash Bar
	Host Bar- with tickets
	Host Bar- Open
	Combination Cash and Host
	Table wine by host
	Extension to 2am required

Additional Details

Payment Information

Deposit Amount	
HST	
Total Paid	
Date	

Credit Card Type	
Name on Credit Card	
Credit Card Number	
Credit Card Expiry Date	

I have read the Terms and Conditions within the Manuels River *experience* Facility Rental Agreement, and I am aware that I am responsible for informing my guests of all stipulations and policies, and I accept the conditions as stated.

Signature: _____

Date: _____