



**G O L D E N C O W**

TONGALA DAIRY INDUSTRY  
TRAINING CENTRE

**POSTAL ADDRESS:** PO BOX 113, TONGALA 3621.

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**FACILITY BOOKING SHEET**

**DATE OF BOOKING:**.....

**COMPANY NAME:**..... **CONTACT NAME:**.....

**CONTACT PHONE:**..... **FAX:**.....

**NUMBER OF PEOPLE:**..... **ARRIVAL:**..... **DEPART:**.....

**ROOM REQUIRED ( PLEASE TICK REQUESTS)**

**COMPUTER (ROOM ONLY)**.....SEATING, TRESSILS, .....PER HOUR \$.....

**WITH COMPUTERS (NUMBER PLEASE)**.....PER HOUR \$.....

**CONFERENCE**.....SEATING, TRESSILS.....PER HOUR \$.....

**BOARD**.....SEATING, TRESSILS.....PER HOUR \$.....

**EQUIPMENT REQUIRED**

**WHITEBOARD** YES NO **FLIP CHART** YES NO

**OVERHEAD** YES NO **DATA SHOW** YES NO \$100 PER DAY

**TV/VIDEO** YES NO

**SCREEN** YES NO

**CASSETTE PLAYER** YES NO PER 1/2 DAY \$..... PER DAY \$.....

**MORNING TEA** YES NO **AFTERNOON TEA** YES NO

**(T/C/BIS)** PER HEAD \$..... **(T/C/BIS)** PER HEAD \$.....

**OTHER:**.....

**LUNCH** YES NO PER HEAD \$.....

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**BOOKING TAKEN BY:**..... **DATE:**.....

**ACCOUNT TO BE SENT TO:**.....

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**STAFF MEMBER OPENING** .....

**STAFF MEMBER CLOSING** .....