

# LAUNCESTON CHAMBER OF COMMERCE



## BOARDROOM REQUEST FORM

The Launceston Chamber of Commerce offers businesses access to a well-appointed, centrally located meeting room Level 1 / 29 Paterson Street, Launceston. Our Board Room seats up to 16 people and is an ideal venue for small meetings, interviews, a temporary office or training facility. This space provides an ideal option for members requiring 'neutral territory' for meetings requiring privacy and is a great space to meet away from regular office interruptions.

**Availability and Enquiries:** Ellen French by phone 03 6331 9364 or email [ellen.f@lcc.asn.au](mailto:ellen.f@lcc.asn.au)

**Room Rate:** \$130 full day / \$80 part day (minimum 2 hours) (plus GST)

**Equipment:** White board at no charge

**Catering:** You are welcome to provide your own catering or it can be arranged for you to suit your needs. The Chamber can assist with referrals to member services.

**Catering Costs:** Continuous Tea and Coffee \$2.50 per person per day (plus GST)  
Morning or Afternoon Tea (tea/coffee with gourmet biscuits) \$5.50 per person (plus GST)  
Other catering requirements are priced individually on request

### MEETING DETAILS

Company Name: .....

Contact Name: .....

Phone: ..... Mobile: .....

Billing Address: .....

..... STATE: ..... PC: .....

Meeting Date/s: (1) ..... (2) ..... (3) .....

Event Title: .....

Start Time: ..... End Time: ..... Number Attendees: .....

### **AFTER HOURS BOOKINGS KEY COLLECTION** (key must be collected no later than 4.30pm)

Name of person to collect key: ..... Time of key collection: .....

Name of person to return key: ..... Time of key return: .....

**Catering Required:** YES / NO

### Tea and Coffee Only

Morning Tea Time: .....am Details/Budget: .....

Afternoon Tea Time: .....pm Details/Budget: .....

Lunch Time: .....pm Details/Budget: .....

Special Requirements: .....

I accept that the above details are as per my requirements and agree to pay charges as stated.  
Please note a cancellation fee will apply if cancellation is less than 5 days prior to date of booking.

Signature ..... Dated .....

Payment by:  Cheque  Credit Card (details below)

Please indicate card type:  MASTERCARD  VISA  BANKCARD

CARD NUMBER: \_ \_ \_ \_ / \_ \_ \_ \_ / \_ \_ \_ \_ / \_ \_ \_ \_

EXPIRY DATE: \_ \_ / \_ \_ SIGNATURE: .....

**BOOKINGS WILL NOT BE CONFIRMED UNTIL RECEIPT OF SIGNED BOOKING SHEET**