



Booking form to be returned to [twyfordccb bookings@gmail.com](mailto:twyfordccb bookings@gmail.com) or posted to  
**8, Queen Street, Twyford, Winchester, SO21 1QG**

**Hirers contact details**

Name:	
Address:	
Contact phone number:	
Email address:	
Date of function:	Time of Function:
Time of entry to TCC:	Time of departure of TCC:
Details of function/event:	
Do you have Public Liability Insurance YES / NO <b>(please specify)</b>	
Numbers attending:	
Entertainment (if any):	
If you are providing food as a food business, <b>please look carefully at 6.3 in T&amp;C's</b> and please give your Food Registration number Public Liability Insurance policy number	
Do you require a licensed Bar YES/NO <b>(please specify) Please look carefully at 6.8 in T&amp;C's</b> (a copy of photo ID and a photo of that person holding the ID is required to be submitted with this booking form and that person must be at the event)	
Occasion/Type of function	
Maskell Room / Lounge Area / Both / <b>(please specify)</b>	
If the kitchen is required, is this for Refreshments Only / Catering <b>(please specify)</b>	
Refundable Deposit required £ (returned if no additional cleaning required)	
Total Cost of function £	
Payment of Hire Charge and Deposit to be made by BACS to <b>Twyford Community Centre CIC</b> Sort Code ; <b>60-83-71</b> Account Number; <b>39278988</b>	
Account details for the repayment of any deposits. <b>Account name:</b> <b>Sort Code:</b> - - <b>Account Number</b>	
I confirm that I have read and agree to abide to the Terms and Conditions of the Twyford Community Centre	
Signature of Hirer.....	Date.....
Signature of TCC representative .....	Date.....