

GERALDTON CURLING CLUB Box 790 Geraldton, ON POT 1M0

www.geraldtoncurlingclub.ca

Curling Club Booking Request Form

Oganization or Group Name	:			
Type of Event:Size of Group Expected:				
First Name:	Last Name:			
Telephone:	Email:			
Mailing Address (for billing	purposes)			
City	Postal Code	Pro	ovince	
Date requested:	Time fro	om:	to:	
Planning to decorate?				
Please check facilities requir	red for your booking:			
Lounge only: □yes □no f	fee: \$200.00		=	
Kitchen/Lounge: □yes □no	p fee: \$250.00		=	
Bar/Kitchen/Lounge: □yes	s □no fee: \$300.00		=	
Curling Ice (only): □yes □	no fee: \$20/h/sheet # sheets	@	hours =	
Curling Equipment Needed?	' □yes □no fee: \$25.00		=	
Deposit (to be returned if tab	oles/chairs/signs etc are back i	in proper pla	ace) = \$100.	.00
		Sub HS7	total =	
			ΓAL =	
Booking Deposit of \$50 is re	equired to hold the booking d	late: P.	AID NOT PAI	ID .
kind and number of bottle ** If any GCC equipment is	on the dinner tables, please aces. Please advise also if coffe damaged, or items lost or stol event, in excess of four hours	ee is to be av len, an addit	vailable through the charge will	he bar. be added on.
Notes:				