

Conference Booking Form

Please ensure that ALL the following details are completed.

CLIENT DETAILS

Event Date(s): Event Title	:		N (b e Co	efore vent) ontact ame:			
			`	n the			
Organisatio	n:		O Nu	day) rder mber: (if licable)			
Invoice Address:							
Tel:							
Fax:			—— Email:				
	ROOM/S & DELEGATE NUMBERS						
Room/s:					-	nber of egates:	
IMPORTANT: Delegate numbers must be confirmed 5 working days before the event. Cancellation within 5 working days of event may be charged up to 100% of room hire rate. Cancellation within 24 hours of event may be charged for room hire and catering in full. Parking is limited and if you do not operate a car sharing policy then please ask delegates to park responsibly, Red doles Lane must not be obstructed.							
EVENT TIMES							
Event start time:		Even	Event finish time:				
Do you need any time in advance of the start time for setting up purposes? (✓)							
YES: NO:							
If YES please state what time you will need to arrive: (please ensure this is as accurate as possible in order for us to have staff available to assist you)							

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BREAK & LUNCH TIMES

Please confirm the time/s of your refreshment break periods:

1 st refreshments:	
Mid-morning refreshments:	
Mid-afternoon refreshments:	
Any other break times?	

Refreshments consist of Tea, Coffee, Herbal Teas & Biscuits. Complimentary orange cordial, water and mints will be provided in your room.

If you require lunch, please indicate your buffet choice and lunchtime below:

Buffet choice: (all menus include Tea and Coffee)	
Time:	
Any special dietary requirements?	

EQUIPMENT REQUIRED

Please indicate below what equipment you will require (✓)

Please note we charge for the hire of laptops & projectors, see equipment charges.

The use of internet and DVD players are included in this charge.

LCD Projector	Laptop	Flip Chart	
Laptop/PC with Internet access	Video player	DVD Player	

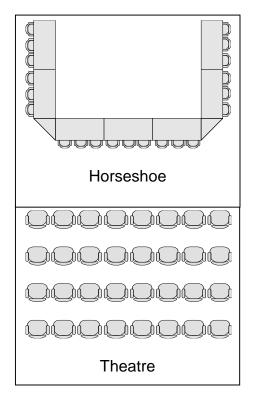
DELEGATE REGISTER

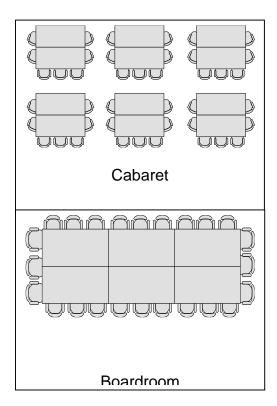
Please indicate below whether your event will have a delegate register (✓)

All delegates attending the Textile Centre of Excellence are required to sign in unless they are on an event register.

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ROOM LAYOUT





Above are some of the room layouts available. In the box below, please indicate which style you prefer, but note that room size and delegate numbers may affect the final layout

Preferred room layout:	
Signed:	Date:

Please fax, post or e-mail the completed booking form to:

Lynn Giblin
Textile Centre of Excellence
Red Doles Lane
Huddersfield
HD2 1YF

Tel: 01484 346500 Fax: 01484 346501 Email: lynngiblin@textile-training.com

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