

Ballymote FRC- Room Booking Form

Date(s) Required:

Room Requested:

Time Start:

Time Finish:

Amount of people attending:

Type of Booking :

Contact Details:

Name:

E-Mail :

Mobile Number.

Address :

Eir Code:

Additional Information/ Room Set Up Requirements:

I _____ (Name) have read the policy for groups or classes using Ballymote Family Resource Centre and will adhere to its guidelines.

Signed (Hirer)

..... **Date :**

Office Use Only:

Booking filed and on System :

Form(s) Signed By (hirer) :

Signed Office Staff :