



R O S S D A L E

# ROSSDALE GOLF CLUB

Sixth Avenue, Aspendale, 3195

Melways Ref: 92 K7

A.B.N. 64 004 271 587 A.C.N. 004 271 587

## EVENT BOOKING FORM

Company/Organisation (if applicable): \_\_\_\_\_

Contact Name: Mr/Mrs/Ms/Miss \_\_\_\_\_

Postal Address: \_\_\_\_\_

*Suburb*

*Postcode*

Billing Address: \_\_\_\_\_

*Suburb*

*Postcode*

Contact Details: Phone (B): \_\_\_\_\_ Phone (H): \_\_\_\_\_

Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Event Date: First Option: \_\_\_\_\_ Second Option: \_\_\_\_\_

Event Room: *Please Circle:* Dining Room (Seats 90)  
Members Lounge (Seats 40) *After 7 pm only*  
Outdoor BBQ Pergola (Seats 60)  
Entire Clubhouse (Seats 190)

Type of Event: \_\_\_\_\_

Event Time: Start: \_\_\_\_\_ Finish: \_\_\_\_\_

Number of Guests: Adults \_\_\_\_\_ Children \_\_\_\_\_

Menu Choice: \_\_\_\_\_

Deposit required for all events is \$500.00 or as advised by Rossdale Golf Club. This Event Booking Form must be accompanied with the deposit. Cheque, credit card (*no Diners Card or American Express*) or cash is accepted. Until receipt of booking form and deposit, all bookings are considered tentative and RGC reserves the right to re-book the event date after consultation with you as a tentative client.

I/We acknowledge that I have read and understand the Terms and Conditions of the booking.

Name: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Signed: \_\_\_\_\_

Office Use:  
Receipt No. \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_