

Queen Elizabeth Hall Worstead  
Registered Charity no. 1026313

**Booking Form**

(01/11/2019)

**Hall Contact:** Shirley Jordan, Hall Manager  
**Address:** 51 Norwich Rd, North Walsham, Norfolk, NR28 0DS  
**Telephone no:** 01692 406582  
**Email:** [shirleyjordan123@BTinternet.com](mailto:shirleyjordan123@BTinternet.com)

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**Hirer Name** \_\_\_\_\_

**Organisation** \_\_\_\_\_  
(if applicable)

**Position in Organisation** \_\_\_\_\_

**User Address** \_\_\_\_\_

\_\_\_\_\_ **Post Code** \_\_\_\_\_

**User Telephone no.** \_\_\_\_\_ **Mobile** \_\_\_\_\_

**User Email** \_\_\_\_\_

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<b>Booking Details</b>	<b>Individual Booking Only</b>	<b>Block Booking of</b> _____ <b>Weeks</b> (max. 12 months)
	<b>Day</b> _____	<b>Start Date</b> _____
	<b>Date</b> _____	<b>End Date</b> _____
	<b>Start Time</b> _____	<b>End Time</b> _____ (please include set up & clear down time)
	<b>Total Attendees</b> _____	<b>Hire Purpose</b> _____
	<b>no. Children Attending</b> _____	<b>Child Age Bracket</b> _____
	<b>Public or Private Event</b> _____	<b>Charity or Commercial</b> _____

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<b>Location</b>	Main Hall	Playing Field	Kitchen
	Club Room	Meeting Room	Bar & Toilets
	Car Park	Terrace	Stage

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<b>Extra Areas</b>	Catering	Bar Staff	Security
	Toilet Hire	Field Parking	PA System
	First Aiders	Volunteers	Projector

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<b>User Insurance</b>	<b>Insurer</b> _____	<b>Cover Type</b> _____
	<b>Liability Limit</b> _____	<b>Expiry Date</b> _____

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<b>Licences</b>	Alcohol	Music	Temp. Event
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<b>Office Use Only</b>		<b>Amount</b>	<b>Date</b>
<b>Booking Approved</b> _____		<b>Deposit Paid</b> _____	_____
<b>Entered in Diary</b> _____		<b>Paid in Full</b> _____	_____
<b>Special Conditions</b> _____			

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