

## Confirmation Booking Form

Please complete this form and return with a 30% (min\$350) deposit to:

(Cheques/money orders)

**Helen's Catering Professionals**     *or*  
 PO Box 275  
 Gymea NSW 2227

(Credit card payments only)

**Fax: 02 9526-5656**

<b>Function date*:</b> .....	<b>Our Ref:</b> ..... (Office use)
<b>Occasion:</b> .....	<b>Menu:</b> .....
Contact name: .....	Home phone: .....
Company name: .....	Work phone: .....
Your address: .....	Fax: .....
.....	Mobile: .....
.....	Other: .....
State:..... Post code: .....	E-mail address: .....
<b>Venue:</b> .....	<b>Number of guests:</b> .....
<b>Venue address:</b> .....	<b>Guests arrive (Time):</b> .....
.....	<b>Desired serving (Time):</b> .....

Please indicate (tick) how you *initially* found out about our services:

- **WEB Search engine** ..... [    ] [    ] Google Advert
- **Yellow pages** ..... [    ]
- **Recommended by** ..... [    ]
- **Attended previous function** ..... [    ]
- **Advertising on Catering Vans** ..... [    ]
- **Other - please state** ..... [    ]

Conditions:

- All care is taken by our staff to minimise the risk of injury. However, it is the responsibility of the hirer to ensure that children are properly supervised and all guests and visitors kept from all cooking, food and potentially hazardous areas
- All care is taken to supply allergiant free products on request, however we cannot guarantee that our product is completely allergiant free nor take responsibility for injury incurred as a result of someone consuming a product that they are allergic to
- All equipment hired is the responsibility of the hirer and all breakages and losses will be charged at cost
- Public risk insurance is the responsibility of the hirer
- An additional fee may be charged for venues with difficult access
- A 30% non-refundable deposit of the order invoice value is payable on booking your function
- Total payment due is the price per head times the total number of guests given on the booking form or any increase in numbers given over the phone at a later date or the minimum number of guests the menu is based on or that attend the function - whichever is greater
- An additional surcharge of 10% for Sundays and 15% for Public Holidays applies to the total invoice value
- Outstanding amounts due may incur an additional 5% of the invoice value for every 7 days payment is delayed (from the function date)
- Credit card fee of 2% applies to all credit card transactions
- Final payment is to be made two working days prior to the function date\* unless alternative written arrangements have been agreed to

**Conditions accepted by:** \_\_\_\_\_ (please print)

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please find enclosed 30% (min \$350) deposit for: .....

- Cheque**   
  **Money Order**   
  **AMEX**   
  **MasterCard**   
  **Visa**

**Card No:**    \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_     **Expires:**    \_\_\_\_\_ / \_\_\_\_\_

**Name on card:** \_\_\_\_\_ **Signature on card:** \_\_\_\_\_

(If different from above)