

Café Group Booking Form

BOOKING OR COMPANY NAME _____ CONTACT _____

RESERVATION DATE ___/___/___ RESERVATION DAY _____ RESERVATION TIME _____AM/PM

PHONE _____ FAX _____ EMAIL _____

NUMBER OF GUESTS _____ INC _____ CHILDREN(3-12YEARS)

EXCLUSIVE USE OF COUCH AREA

(Based on a minimum spend of \$250 in addition to your table spend)

MENU CHOICE

2 Course Breakfast \$24

2 Course Lunch \$34

3 Course Lunch \$39

Entrée & Main

Main & Dessert

***PRE ORDER FROM THE CAFÉ A LA CARTE MENU** (Please attach pre order to this page)

(For groups less than 20 guests order must be received 48 hours prior to the date of your reservation)

PRE SELECTED WINE (Please attach selection to this form)

SPECIAL DIETARY REQUIREMENTS

Vegan

Vegetarian

Gluten intolerant

No pork/shellfish

Dairy intolerant

Fructose intolerant

OTHER _____

TERMS & CONDITIONS

When booking the couch area exclusively, this reservation is based on a minimum spend of \$250 in addition to the table spend of \$34pp for your group.

The Point Café Group Confirmation Form must be completed in order to secure your Group Booking of 12 or more people in The Point cafe. This form must be **signed** and returned to us along with your signed credit card details. Please note that can accept company cheques but **are unable to accept personal cheques.**

CONFIRMATION

Final guest numbers are to be confirmed 48 hours prior to your reservation. This is the minimum number of guests that will be charged for. An increase in numbers will be accommodated in accordance with our accepted capacity and will be charged for at the quoted and agreed per person price.

CANCELLATIONS

If a total cancellation of your reservation is not made 48 hours prior to your reservation, you will be charged 50% of your estimated food bill, based on your confirmed numbers.

American Express Diners Visa Master Card EFTPOS* Cash* *If paying in person only

Card Number _____ Expiry Date _____

Card Holder _____ Signature _____

I have read and understood the terms and conditions outlined above and agree to these terms and conditions.

Please Print Name _____ Signature _____ Date _____

THE POINT

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