



## Canolfan Gymunedol Brynaman Community Centre

Heol Cwmgarw, Brynaman, Rhydaman, Sir Gaerfyrddin SA18 1BU Ffôn/Ffacs: 01269 823400

www.brynaman.org.uk admin@brynaman.org.uk

Registered Company No. / Rhif Cwmni Cofrestredig 04157991 Registered Charity No. / Rhif Elusen Gofrestredig 1092336

### CONFERENCE AND MEETING ROOM HIRE BOOKING FORM 2008

#### PERSONAL DETAILS

Booking Reference:.....

Contact Name:..... E-mail:.....

Name and Address of Organisation:.....  
.....

Telephone No:..... Mobile:..... Fax:.....

Date Required:..... Time Required From:..... To:.....

*Please note that we hire rooms at full day and half day rates meetings of 4.5 hours or more, or those meetings taking place over the 12pm-2pm period will be charged at the full day rate.*

Name & Contact details of trainer (if different).....  
.....

Number attending:..... *to be confirmed 7 days in advance of arrival*

Room Required:..... Room Layout:(*board/theatre/cabaret/horseshoe*):.....

Additional Equipment Required\*:  OHP  Flipchart  Laptop  Projector  Other \*extra charge

Where did you hear about the venue?

Website  Press  Direct Mail  Colleague  Recommendation  Other .....

CATERING REQUIRED – *please see website for prices*

Refreshments

Tea/ Coffee  Fruit Juice  Biscuits

Lunch \**Please refer to menu on the website for details and prices*

Option 1  Option 2  Option 3

Special Dietary Requirements (*please specify and give numbers*):.....  
.....

Timings: Arrival..... AM break..... Lunch Break ..... PM break..... Departure.....

Monitoring Information (*for funding purposes we have to ask the following information from our users*)

Can you please tick the box(es) that most clearly represent your main users:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Women and Girls         | <input type="checkbox"/> Children and Young People | <input type="checkbox"/> Unemployed             |
| <input type="checkbox"/> Black & Ethnic Minority | <input type="checkbox"/> Refugees                  | <input type="checkbox"/> People in poor health  |
| <input type="checkbox"/> LGBT                    | <input type="checkbox"/> Disabled                  | <input type="checkbox"/> People with low skills |
| <input type="checkbox"/> Older People            | <input type="checkbox"/> Other .....               |   |

What area does your organisation serve?

- |                                       |  |                                   |
|---------------------------------------|--|-----------------------------------|
| <input type="checkbox"/> Brynaman     | <input type="checkbox"/> Carmarthenshire | <input type="checkbox"/> Powys    |
| <input type="checkbox"/> Amman Valley | <input type="checkbox"/> NPT             | <input type="checkbox"/> National |

**PLEASE ENSURE THE TERMS AND CONDITIONS ARE READ BEFORE RETURNING THE COMPLETED FORM.**