**GROUP BOOKING FOR FORMAL HALL**

Date & Hall you wish to attend Date/Month/year

|  |  |
| --- | --- |
| **TUESDAY** |  |
| **FRIDAY** |  |

I, …………………………………………………………………………..… wish to make a group booking for formal hall on the

above date, for the …………………………………………………………………………………..…………….(Club/Society/birthday)

My contact No. / Email address is:

I understand that I must not exceed the maximum numbers of guests.

**Tuesday Hall** Maximum group size is 36 people, members or non-members, including yourself.

**Friday Hall** Maximum group size is 18 people including yourself, and the ratio of guests to Robinson members of 3:1 applies.

I have read the menu and require the following special diets listed below to be provided and have **indicated the recipient for each on the list of attendees**. My wine order is also indicated.

Total no. of people in group …………….. including invited non junior members i.e. Fellows etc.

**SPECIAL DIETS/WINE PRE-ORDER Names of any Fellows, DOS/ Supervisors attending**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **V** | Vegetarian |  |  |  |
| **VF** | Vegetarian who eats fish |  |  |  |
| **GF** | Gluten free |  |  |  |
| **VG** | Vegan |  |  |  |
| **NA** | Nut Allergy |  |  |  |
| **DA** | Dairy Free |  |  |  |
| **SA** | Seafood Allergy |  |  |  |
| **AF** | Alcohol Free |  |  |  |
| **SD** | Other special dietary requirement please contact Gary, the Head Chef directly on 39132 or email gjd29@cam.ac.uk or the Catering Office 39119 |  |  |  |

**(Please note Kosher food cannot be provided within the cost of formal hall)**

# GROUP BOOKING AGREEMENT

* I have read and understood the terms for group bookings on the website. I understand that is my responsible for ensuring that:
* My guests behave in way that causes no disruption to other diners or serving staff.
* I will responsible for meeting any penalties that may be imposed for damage, disruption or any other offence caused by my guests.
* The attendees of my booking do not represent any group which many cause controversy, or promote extreme views or intolerance of the views of others.
* I also understand that it is my responsibility to ensure all Robinson members wear gowns to Hall.
* I agree to not reduce. Increase this booking in any way without notifying the Catering Office. And to have the required funds in my meal account by the **REQUIRED PAYMENT DATE OF:**

|  |
| --- |
|  |

**Signed …………………………………………………………………………………………….…**

**Please list all intended attendees on the next page together with their Colleges and diets**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Name (Please PRINT)** | **College (If applicable)** | **Diet indicated above**  |  |
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