

GROUP BOOKING FORM (8+)



DATE OF BOOKING: _____

NAME OF BOOKING: _____

NUMBER OF GUESTS: _____

SET MENU CHOSEN: _____

TIME OF ARRIVAL: _____

PHONE NUMBER: _____

E-MAIL ADDRESS: _____

CREDIT CARD DETAILS

CHEQUE ATTACHED IN THE AMOUNT OF \$ _____

OR

CREDIT CARD DETAILS Amex Visa MasterCard Diners

CARD HOLDERS NAME _____

CARD NUMBER _____

EXPIRY DATE _____

CARD HOLDERS SIGNATURE _____

BOOKING TERMS & CONDITIONS

- i. A cancellation fee of \$100.00 will be drawn off of the nominated credit card if you cancel within 72 hours of your booking
- ii. Cancellations must be made via email
- iii. Finalised guest numbers & menu selections must be confirmed 24 hours prior to your booking. Set menus must be in place for all groups above 8 guests
- iv. No shows will be charged at the set menu rate chosen for your group up to \$56.00 per person to the credit card number provided
- v. If an exception has been made and no set menu is in place a no show fee of \$10.00 per person will be charged to the credit card provided

ACKNOWLEDGEMENT OF TERMS & CONDITIONS

I, _____, of _____, hereby declare that I
(Please print name) (Please print address)

understand and acknowledge the booking terms and conditions as described above.

NAME: _____ DATE: _____

SIGNATURE: _____

DIETARY REQUIREMENTS



For any dietary requirements for your event, please complete the following form in a precise manner and limit one form to one individual.

Booking Name: _____

Booking Date: _____

Name of individual with dietary requirement: _____

Requirement *Please circle:*

VEGETARIAN

VEGAN

DAIRY INTOLERANT

GLUTEN INTOLERANT

FRUCTOSE INTOLERANT

NUT ALLERGY

SHELLFISH ALLERGY

OTHER

Foods I CANNOT consume:

Foods I CAN consume: _____

NB: Berth Restaurant stocks seasonal vegetables and protein in the way of Chicken, Beef & Atlantic salmon.

Berth Restaurant will make every attempt to meet your dietary requirements, however, does not take responsibility for any further complications due to your allergy.