MEETING ROOM HIRE
BOOKING FORM

iCount expect more
the accountancy training partnership

To confirm your booking with iCount Training, please complete this form and return it to reception or email **sup@icounttraining.com** no later than 10 working days before your meeting date.

ORGANISATION	CONTACT NAME	EMAIL ADDRESS

DATE OF BOOKING	NUMBER OF DELEGATES	TITLE OF MEETING *(TO BE DISPLAYED ON ROOM NOTICE BOARD)*	MEETING TIME
			FROM: _____ TO: _____

ROOM SPECIFICATION

RATE OF HIRE (EXCL. VAT)		CAPACITY	ROOM SET-UP *(PLEASE TICK)*	
HOURLY	FULL DAY			
£50 PER HOUR	£300 FULL DAY	UP TO 30	BOARDROOM	☐
			CLASSROOM	☐
_____HRS	☐		OTHER	☐ *(please specify)* _____

OTHER REQUIREMENTS

	QUANTITY
COFFEE	
TEA	
WATER (JUG)	
FLIP CHART	
IT EQUIPMENT *(please specify)* _____	

PAYMENT DETAILS (via CARD)

CARDHOLDERS NAME			
CARDHOLDERS ADDRESS		CARD TYPE	
		VALID FROM	/
		EXPIRY DATE	/
		CV2 NO **3 DIGIT ON BACK OF CARD*	
		ISSUE NO **ONLY MAESTRO/SWITICH*	
CARD NUMBER			

PAYMENT DETAILS (via INVOICE)

BILLING ADDRESS	
POSTCODE	
PO NUMBER *(if required)*	

NOTES:

SIGNATURE: _____ **DATE:** _____/_____/_____

Website: www.icounttraining.com **Email:** sup@icounttraining.com **Telephone:** 0161 228 6564 **Fax:** 0161 236 1885
Address: 16th Floor, Manchester One, Portland Street, Manchester M1 3LD

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