Request a Function Quote

First Name	Surname				
Email	Phone				
Date of Function	/ /				
Function Start Tin	ne 🗆 am 🗌 pm 🏾 D	Duration (max 12 hrs) Number of People			
Function Type	MeetingConferenceOther	🗌 Wedding 🗌 Birthday 🗌 Wake 🗌 Engagement			
Room Size	Small Medium Large Please refer to Capacity & Layouts (page 4)				
Room Layout	 Banquet Cocktail Boardroom Classroom Theatre U-Shape Cabaret Empty 				
Equipment	 Microphone & PA Notepads & Pens Flip Chart Whiteboard & Pens Projector & Screen Dance Floor Stage Lectern Laptop Wireless Laser Presenter Lapel or Head Piece Lapel Chair Covers Partitions AV Leads Pool Table 				
Food Required	Yes No				
Menu Type	 Day Delegate Package Breakfast Burger Bar Canapés Grazing Table Alternate Drop Buffet Roast Carvery Buffet Seafood Buffet Kids Menu 	 Morning/Afternoon Tea High Tea Full Day Half Day On the Go Hot Plated Buffet Pub Classics Premium (4) Premium (6) Premium (8) More Substantial Casual Gourmet Dessert 3 Course 2 Course Main Only Pub Classic With Dessert No Dessert With Dessert No Dessert With Dessert No Dessert With Dessert No Dessert Option 1 Option 2 			

Continued next page >



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Comments About I	Menu			
Drinks Required	□ Yes □ No Duration □ 2 hrs □ 3 hrs □ 4 hrs □] 5 hrs		
Drinks Package	 Standard Beverage Package Premium Beverage Package Spirits Non Alcoholic Cash Bar - Guests Pay Cash Bar - Bar Tab 		Tea &	Coffee
	Drinks			
	□ Yes □ No Number of Rooms Required (max 17)			
l understand and a	accept all Terms & Conditions	Date	/	/
Other Comments - - - - - -				

WHERE DID YOU HEAR ABOUT US?

□ Facebook □ Google Search □ Friends or Family □ Other

If 'Other', please specify _____

Please return this form to **functions@portersplainland.com.au**. Please allow three business days for a response.

