

Terms & Conditions

Tentative pencil booking - will be held for a period of 7 days only, after which time the space will be released.

A minimum deposit of \$500.00 must be received within 7 days of the Tentative booking otherwise the date will not be secured. Functions over \$3000.00 require a deposit of \$1000.00

Guaranteed Numbers - are required 7 days prior to the function date and charges will be based on guaranteed numbers or actual attendees, whichever is greater.

Final Details - Menus, beverage arrangements, entertainment, and room set up, starting and finishing times must be confirmed 14 days prior to the function.

Function Cancellations - The Deposit is non-refundable.

Payment Terms – Balance to be paid on confirmation of final numbers 7 days prior.

Quotes- Quotes are based on estimated numbers given at the time of enquiry, should numbers or arrangements change from the original specifications quotes will be revised accordingly.

Menu Packages: - Menus and package prices are subject to change and all functions booked at least 6 months in advance will receive final package within this time. Clients will be notified of an upcoming change in the menu package or pricing structure.

Food and Beverage: No other food or beverage of any kind (other than a Celebratory Cake) will be permitted to be bought in for consumption at the function.

Advance Bookings- Functions booked more than 12 months in advance from date of enquiry will receive final price 6 months prior to booking as prices & products are subject to change.

Commencement and vacating rooms - The organizer agrees to begin the function and vacate the designated function space at the scheduled times agreed upon.

Compliance - Clients will be responsible to ensure the orderly behaviour of their guests and the Hotel reserves the right to intervene where it sees fit.

Security – The Bridge Hotel will not accept responsibility for the loss or damage to any equipment or merchandise left on the premises prior to, during, or after the function. If additional security is required for the function, this cost will be incurred by the client.

Damages - Clients will assume responsibility for all damages caused during the function by any of their guests attending the function, whether in the rooms reserved or in any part of the Hotel.

Liability - If the Hotel has a reason to believe that a function will affect the smooth running of the Hotel, its security or reputation, it reserves the right to cancel the function without liability

Gifts – Gifts are the responsibility of the client and no responsibility will be taken for the damage to or loss of these gifts should it arise. All gifts should be taken off the premises at the conclusion of the reception.

Displays - No items are to be attached, pinned or glued to the wall surface of any area of the Hotel without prior approval of Hotel Management.

G.S.T. - All quoted prices are inclusive of G.S.T. Smoking: The Nepean & Mordialloc Rooms are strictly NON SMOKING. Smoking is permitted on the outdoor terrace area.

Terrace door – Terrace doors must be closed by 10.30 pm due to noise restrictions

Booking Form

NAME OF HOST/ORGANISER: _____

ADDRESS OF HOST/ORGANISER _____

CONTACT NUMBERS: HOME: _____ MOBILE _____

EMAIL _____

DAY OF FUNCTION: _____ DATE: _____

TIMES REQUIRED FROM: _____ AM/PM TO _____ AM/PM

TITLE OF FUNCTION/OCCASION: _____

MINIMUM NUMBER OF GUESTS: ADULTS _____ CHILDREN _____ TOTAL _____

PLEASE NOTE:

FINAL NUMBERS MUST BE CONFIRMED NO LATER THAN 7 DAYS PRIOR TO FUNCTION

ADDITIONAL INFORMATION:

DEPOSIT MUST ACCOMPANY THIS BOOKING FORM.

CHEQUES MADE PAYABLE TO "DOYLES BRIDGE HOTEL"

ALL MAJOR CREDIT CARDS ACCEPTED

BOOKINGS ARE CONSIDERED TENTATIVE UNTIL THE REQUESTED DEPOSIT

AND SIGNED BOOKING FORM ARE RECEIVED.

**I ACKNOWLEDGE HAVING RECEIVED A COPY OF THE GENERAL TERMS AND CONDITIONS,
AND THAT SMOKING IS NOT PERMITTED IN THE BRIDGE HOTEL FUNCTION ROOMS.
I FURTHER COMPLY WITH SUCH CONDITIONS ON ACCEPTANCE OF THE APPLICATION.**

SIGNATURE _____ DATE _____

CREDIT CARD TYPE AMEX DINERS VISA MASTERCARD

NAME OF CARD HOLDER _____

CARD NUMBER _____

EXPIRY DATE _____ DEPOSIT AMOUNT \$ _____