

the manor
datchet
windsor

CONFERENCE ENQUIRY FORM

CONTACT NAME _____
AGENCY NAME _____
COMPANY NAME _____
ADDRESS _____

POST CODE _____
TELEPHONE _____
FAX _____
MOBILE _____
E-MAIL _____

ACCOMMODATION
SINGLES _____
DOUBLES _____
TWINS _____
FAMILY _____

EQUIPMENT REQUIRED (provide details)

DATE REQUIRED _____
ROOM REQUIRED REGENT
 CASTLE
 WINDSOR
 THAMES
 ROYAL
 ETON

For Office Use Only
TAKEN BY _____
DATE TAKEN _____
BOOKING SOURCE _____
PROVISIONAL BOOKING yes no

LAYOUT REQUIRED U-SHAPE
 THEATRE
 CABARET
 CLASS ROOM
 BOARD ROOM

FEEDBACK

START TIME _____
FINISH TIME _____
No of DAY DELEGATES _____
No of 24hr DELEGATES _____
TEA / COFFEE ARRIVAL
 MID-MORNING
 AFTERNOON
 EXTRAS
LUNCH yes no
DINNER yes no
VEGETARIAN (Number) _____

RATES