

Nancy Hands
Bar & Restaurant
30/32 Parkgate St
Dublin 8



Contact Name :

Work No :

Company Name :

Mobile No :

Contact Address :

Fax No :

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Email :

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CHRISTMAS LUNCH FROM 12.00 NOON, DINNER FROM 6.30 -10.00 PM

Function :

Date of Xmas Reservation :

Lunch Dinner Other

.....

Time Reserved :

No. of People Attending :

Special Requests :
.....
.....

CONFIRMATION OF RESERVATION:

Deposit Method :

Deposit Amount :

Deposit by Credit Card :

I authorise you to complete a pre-authorisation to my Visa/Mastercard/Other Credit Card to the sum of €..... to cover the deposit of the Christmas Party. In the event of a cancellation the card will be charged the deposit.

Card No:

Expiry Date: /

TERMS & CONDITIONS :

- All reservations will be treated as provisional and amendable pending the receipt of a deposit of €10 (Lunch) €15 (Dinner) per person All deposits are strictly non-refundable and any bookings without a deposit method will be released.
- The minimum number reserved will be the number that the party will be charged for on the evening unless advised 4 weeks prior to the event.

SIGNATURE:

DATE: