

# Sienna Marina

R E S T A U R A N T & B A R

Name / Company \_\_\_\_\_

Address \_\_\_\_\_

Phone No \_\_\_\_\_

Mobile \_\_\_\_\_

Fax No \_\_\_\_\_

Type of Function \_\_\_\_\_

Menu \$ \_\_\_\_\_

Date of Function \_\_\_\_\_

Time \_\_\_\_\_

No. of Persons \_\_\_\_\_

Credit Card Type  Visa  Mastercard  Amex  Diners

Credit Card No \_\_\_\_\_

Expiry Date \_\_\_\_\_

4 Digit Security No \_\_\_\_\_

(applicable only for American Express)

Extra charge of 3% on Diners and American Express

Cardholder's Name \_\_\_\_\_

Signature \_\_\_\_\_

- Bookings for more than 10 persons, we encourage you to discuss a set menu and any special requirements you may have with our chef who will be pleased to cater to your wishes. We enclose sample menus, which may be of interest to you when making your decision.

- For confirmation of your booking, we request a 25% deposit at least 48 hours prior to your function.

- Cancellation of confirmed bookings must be made at least 7 days prior to the function date or a 25% of the total food cost per head booked will be charged to the credit card details provided.

- Please note that after confirmation of this fax has been received the number of persons will be fixed and you will be charged for this number unless a further fax is received altering the original number of persons attending within 48 hours prior to the function.

- In order that we may be of assistance to you, please do not hesitate to contact us on the below phone number or fax us your requirements. We look forward to hearing from you.

I, the undersigned, have read the terms and conditions for Sienna Marina and confirm that the above information is correct.

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

Sienna Marina

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