**EPPING TOWN COUNCIL**

**INITIAL BOOKING ENQUIRY FORM**

|  |  |
| --- | --- |
| **Enquirer’s Name** |  |
|  |  |
| **Enquirer’s Postcode** |  |
|  |  |
| **Epping Hall** |  |
| **(Please indicate which room if known)** |  |
| **Main Hall** |  |
| **Conference Room** |  |
| **Conference Room (Half)** |  |
|  |  |
| **Jack Silley Pavilion** |  |
| **(Please indicate which room if known)** |  |
| **Essex Room** |  |
| **Forest Room** |  |
|  |  |
| **Date required** |  |
| **Times required****(Please allow for set up and clear up within these times)** |  |
|  |  |
| **Type of event****(If birthday party please state age)** |  |
| **Any other information which may help us with your enquiry** |  |

* **Please note: by submitting this form, you are consenting to us processing your details in relation to hall bookings with Epping Town Council.**

**Please complete and return this form by email to:**

**info@eppingtowncouncil.gov.uk**

**A member of our team will be in touch as soon as possible.**