

# THE BOOKING FORM

WEDDING RECEPTION DATE REQUESTED: \_\_\_\_\_

PROVISIONAL NUMBERS (GUESTS ANTICIPATED): \_\_\_\_\_ ADULT DAY GUEST NOS: \_\_\_\_\_ ADDITIONAL EVENING GUEST NOS: \_\_\_\_\_

CEREMONY TO BE HELD AT THE HOTEL: YES/NO (PLEASE DELETE AS NECESSARY): \_\_\_\_\_ CHURCH NAME: \_\_\_\_\_

FULL NAME OF BRIDE: \_\_\_\_\_

FULL NAME OF GROOM: \_\_\_\_\_

YOUR NAME (PERSON COMPLETING FORM): \_\_\_\_\_

FULL ADDRESS: \_\_\_\_\_

POST CODE: \_\_\_\_\_

HOME TELEPHONE NUMBER: \_\_\_\_\_

MOBILE TELEPHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS OF THE BRIDE/GROOM: \_\_\_\_\_

A £1,000.00 (NON-REFUNDABLE) DEPOSIT IS REQUIRED TO CONFIRM THE BOOKING.

THE HOTEL SHALL CONTACT YOU ON RECEIPT OF YOUR BOOKING FORM AND DEPOSIT TO DISCUSS DETAILS AND WILL LOOK FORWARD TO WELCOMING YOU AGAIN TO MARYCULTER HOUSE HOTEL.

## PAYMENT SCHEDULE:-

- 50% OF AGREED ESTIMATED COST TO BE PAID 6 MONTHS PRIOR TO YOUR WEDDING
- 75% OF AGREED ESTIMATED COST TO BE PAID 3 MONTHS PRIOR TO YOUR WEDDING
- 100% OF AGREED ACTUAL COST TO BE PAID 14 DAYS PRIOR TO YOUR WEDDING
- 14 DAYS PRIOR TO YOUR WEDDING DATE WE MUST RECEIVE A COMPLETE TABLE PLAN, SHOWING THE TOTAL NUMBER OF ADULT AND CHILDREN GUESTS, WITH AGES OF CHILDREN AND SEX OF EACH GUEST, ALONG WITH ADDITIONAL EVENING GUEST NUMBERS
- 7 WORKING DAYS PRIOR TO YOUR WEDDING DATE FULL PAYMENT OF ACTUAL COSTS TO BE PAID, ANY CHANGES AFTER THIS DATE ARE TO BE SETTLED EACH TIME AN ALTERATION IS MADE  
(CREDIT CARD DETAILS WILL BE REQUIRED TO SECURE ANY EXTRAS ON THE DAY)

THIS SCHEDULE WILL BE REISSUED TO YOU GIVING THE EXACT DATES FOR YOUR PAYMENTS DUE ONCE THE DEPOSIT AND BOOKING FORM HAVE BE PROCESSED BY OUR ACCOUNTANT, IN APPROX. 7 DAYS.

I HAVE READ, UNDERSTOOD, ACCEPT AND AGREE TO THE TERMS AND CONDITIONS OF CONTRACT AND TO PROVIDE A NON-REFUNDABLE DEPOSIT AS REFERRED TO HEREIN.

SIGNED (BRIDE): \_\_\_\_\_ PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SIGNED (GROOM): \_\_\_\_\_ PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SIGNED (ON BEHALF OF COMPANY): \_\_\_\_\_ PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

ADDRESS: MARYCULTER HOUSE HOTEL LTD, SOUTH DEESIDE ROAD, MARYCULTER, ABERDEEN, AB12 5GB