

**SHREE VISA OSHWAL COMMUNITY  
MAHAJANWADI BOOKING FORM – TO BE FILLED IN BLOCK LETTERS ONLY**

**PERSONAL - FULL NAME OF HIRER (FILL IN IF BOOKING IS UNDER A PERSONAL NAME)**

FIRST NAME	MIDDLE NAME	SURNAME	VOC MEMBERSHIP NO.	GAAM

**BUSINESS/ORGANISATION – FULL NAME OF HIRER (FILL IN IF BOOKING IS UNDER A BUSINESS NAME)**

NAME OF BUSINESS/ORGANISATION

**CONTACT DETAILS**

BUSINESS PHONE NO.	MOBILE NO. 1	MOBILE NO. 2	E-MAIL

**KITCHEN REQUIREMENTS FOR PREPARATION PRIOR TO EVENT DAY 1** (SPACES ARE CHARGEABLE AS PER THE PREVAILING RATES)  
(FILL IN THE KITCHEN REQUIREMENTS FOR PREPARATION BY THE CATERER PRIOR TO EVENT DAY 1; WHETHER YOU REQUIRE THE KITCHEN)

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**PRE-DÉCOR REQUIREMENTS** (FILL IN PRE-DÉCOR REQUIREMENTS PRIOR TO FUNCTION DAY; WHETHER YOU REQUIRE FULL DAY PRE-DÉCOR OR NOT)

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**DAY 1 - SPACE REQUIRED** (TICK APPROPRIATELY)

BHOJANSHALA	PACK HALL	CHOWK 1	CHOWK 2	SENIORS LOUNGE	KITCHEN

**DAY 1 - FUNCTION DETAILS**

TYPE OF FUNCTION	DATE OF FUNCTION	TIME OF FUNCTION	APPROX NO. OF GUESTS
DECORATOR NAME:		DECORATOR CONTACT NO.	
CATERER NAME:		CATERER CONTACT NO.	

**DAY 2 - SPACE REQUIRED** (TICK APPROPRIATELY) (FILL IN IF FUNCTION IS IN CONSECUTIVE DAYS)

BHOJANSHALA	PACK HALL	CHOWK 1	CHOWK 2	SENIORS LOUNGE	KITCHEN

**DAY 2 - FUNCTION DETAILS** (FILL IN IF FUNCTION IS IN CONSECUTIVE DAYS)

TYPE OF FUNCTION	DATE OF FUNCTION	TIME OF FUNCTION	APPROX NO. OF GUESTS
DECORATOR NAME:		DECORATOR CONTACT NO.	
CATERER NAME:		CATERER CONTACT NO.	

**DAY 3 - SPACE REQUIRED** (TICK APPROPRIATELY) (FILL IN IF FUNCTION IS IN CONSECUTIVE DAYS)

BHOJANSHALA	PACK HALL	CHOWK 1	CHOWK 2	SENIORS LOUNGE	KITCHEN

**DAY 3 - FUNCTION DETAILS** (FILL IN IF FUNCTION IS IN CONSECUTIVE DAYS)

TYPE OF FUNCTION	DATE OF FUNCTION	TIME OF FUNCTION	APPROX NO. OF GUESTS
DECORATOR NAME:		DECORATOR CONTACT NO.	
CATERER NAME:		CATERER CONTACT NO.	

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**BOOKING CANCELLATION CHARGES** (IN CASE OF CANCELLATION, BELOW CHARGES WILL APPLY)

CANCELLATION CHARGES	% OF HALL CHARGES OF ALL HIRED HALLS
CANCELLATION BETWEEN 3 MONTHS & OVER, BEFORE THE DATE OF FUNCTION	5%
CANCELLATION BETWEEN 2 – 3 MONTHS, BEFORE THE DATE OF FUNCTION	20%
CANCELLATION BETWEEN 1 – 2 MONTHS, BEFORE THE DATE OF FUNCTION	30%
CANCELLATION BETWEEN 2 WEEKS – 1 MONTH, BEFORE THE DATE OF FUNCTION	40%
CANCELLATION BETWEEN 1 WEEK – 2 WEEKS, BEFORE THE DATE OF FUNCTION	50%
CANCELLATION BETWEEN 1 DAY – 1 WEEK, BEFORE THE DATE OF FUNCTION	75%
CANCELLATION ON THE DAY / NO SHOW	100%

PLEASE NOTE, AN EXCEPTION ON CANCELLATION CHARGES WILL BE GIVEN IN CASE OF DEATH IN THE FAMILY OF THE HIRER

**Disclaimer**

Shree Visa Oshwal Community Nairobi and its Trustees, officers, employees, servants, agents and representatives do not accept any liability whatsoever to the Hirer/Caterer/Decorator\* at the Mahajanwadi or to any insurer for any loss, damage, destruction, injury, death or other adverse outcome occurring to the person(s) or property of the Hirer/Caterer/Decorator\* whether arising from accident, fire, theft, break-in, burglary or any other cause whatsoever or howsoever occurring and by whomsoever caused or arising from the breach of contract, breach of duty, carelessness, recklessness, negligence or gross negligence or wrongful acts or omissions of the trustees, officers, employees, servants, agents and representatives of Shree Visa Oshwal Community Nairobi. It is the Hirer's/Caterer's/Decorator's\* sole responsibility to procure insurance cover for any such eventuality and to notify its insurers of the existence of this disclaimer.

**Indemnity**

The Hirer/Caterer/Decorator\* hereby indemnifies and keeps Shree Visa Oshwal Community Nairobi, its trustees, officers, employees, servants, agents and representatives fully indemnified against any third party claims for any loss, damage, destruction, injury, death or other adverse outcome occurring to any visitor, invitee, licensee or guest or to any of the agents, employees, visitors, invitees, licensees or guests of Shree Visa Oshwal Community Nairobi or of the Hirer/Caterer/Decorator\* whether arising from accident, fire, theft, break-in, burglary or any other cause attributable to the breach of contract, breach of duty, carelessness, recklessness, negligence or gross negligence or wrongful acts or omissions of any of the Hirer's/Caterer's/Decorator's\* officers, employees, servants, agents, representatives, visitors, invitees, licensees or guests at the Premises.

**THIS FORM IS SUBJECT TO THE ATTACHED RULES AND REGULATIONS**

**A REFUND OF OVER KSH. 15000/= AFTER FINAL BILLS, WILL BE PAYABLE BY CHEQUE ONLY AFTER FOURTEEN (14) WORKING DAYS.**

**REFUND PAYABLE TO** (NAME TO BE WRITTEN ON CHEQUE): \_\_\_\_\_

SIGNATURE OF HIRER: \_\_\_\_\_

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

RELATION TO HIRER (IF DIFFERENT FROM HIRER) \_\_\_\_\_