**VENUE HIRE BOOKING ENQUIRY FORM**

Please complete and return this booking form to:

**Holy Trinity Church, (**South Side Vestry Door),

Trinity Street,

Huddersfield,

HD1 4DT

***Or***

An electronic/scanned copy via email to [office@holytrinityhuddersfield.com](mailto:office@holytrinityhuddersfield.com)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name and/or Organisation** |  | | | |
| **Charity Number if applicable** |  | | | |
| **Name and Address where invoice is to be sent:** |  | | | |
| **Email address:** |  | | | |
| **Contact name:** |  | | | |
| **Contact Number:** |  | | | |
| **Date(s) of Event (s)** |  | | | |
| **Purpose/nature of event(s):** |  | | | |
| **Time of event(s) - including any set up/down time** | **From** |  | **To** |  |
| **Maximum expected number of attendees:** |  | | | |
| **Any Additional information:** | | | | |
|  | | | | |

**Room and equipment requirements:**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Main Worship Area** |  | | |
| (includes as required) | *(Please indicate Y to all those applicable)* | | |
| Kitchen |  | | |
| Welcome Area |  | | |
| Small meeting rooms (2 available) |  | *If Y – number required* |  |
| Use of Piano |  | | |
| Use of Organ |  | | |
| **Additional** | | | |
| Use of AV for projection\* |  | | |
| Use of Sound system\* |  | | |

\* ***Use of AV (Sound system and/or Projection)***

*If you wish to use the AV system (Sound and/or projection), included in the additional hire cost is someone to set up and, if necessary, operate this system for you.*

*If you are intending to use a laptop you will need to bring your own. We provide cables for the connection of a laptop to the projection systems* ***via an HDMI cable only****. Please ensure your laptop has a suitable HDMI output or that you bring an adaptor to ensure that your laptop will be able to connect to the system via HDMI.*

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Welcome Area only** |  | | |
| (includes as required) | Please indicate Y to those that apply | | |
| Kitchen |  | | |
| Small meeting rooms (2 available) |  | *If Y – number required* |  |
| Use of Piano |  | | |
| Use of AV system\* |  | | |
| \**This includes basic projection and sound playback only (any further requirements may incur additional charges)* | | | |
| **Layout required** |  | | |
| * Cinema Style |  | | |
| * Boardroom style |  | | |
| * Cabaret style |  | | |
| * Other – please specify |  | | |

|  |  |
| --- | --- |
| **3. Small meeting room(s) only** |  |
| Includes use of kitchen as required) | |
| Number of rooms required (2 available) |  |