



BOOKING FORM Bunbury City Kart Club (INC.)

This form is to be completed and submitted **NO** later than **14 days** prior to the booking date, failure to do so will result in the track being unavailable for the requested event.

NAME: _____

CONTACT NUMBER: _____

ADDRESS: _____

EVENT: _____

DATE OF EVENT: _____

DURATION OF EVENT: _____

FACILITIES REQUIRED: _____

Please either fax this form to 97254364, or email to bunburycitykartclub@yahoo.com.au.

On approval of event an invoice will be sent to the above address.

50% deposit is required 7 days prior to event.

Office Use Only

Approved: YES NO

Approved by: _____

Signed: _____

Name: _____

Date: _____

Invoice Sent: YES NO