## **GRAND SUBANG JAYA @ SS15**

## PARTIES/FUNCTIONS BOOKING APPLICATION FORM

	Area :	Multipurpo	se Hall (	)	BBQ (	)		
Owner's Particulars Owner O Tenant Name : Parcel No. : Contact No. :  Booking Detail Date : Period of Booking : Purpose : No. of Guest :  Payment Detail	a) BBQ b) Multipi O Dinner ppl	urpose Hall Reception (Please adv	- :	ours (Froi day Party st Car rec	○ 1p.m-5p n / ○ Oth	.m ○ 6p.m-⁄ to ner: umber <b>3 day</b> s	)	
Eb) Multipurpose Hall : [ Eb) Multipurpose Hall : [ Eb) Table Tennis : [	Equipmen Deposit (F Electricity Deposit (F	Refundable) at Rental Refundable) Charges Refundable) g Bat & Ball	: RM100.0 : RM500.0 : RM50.00	00 00 0/hour x _ 0	Hours	= RM		
TERMS & CONDITIONS  1. All reservation shall be reject/ not to permit such rows are requiring to end and the state of the facility of the shall be deducted or forfeir towards. The Management, its adamage to any personal prindemnify The Management of the Management of all relevant of all relevant of all relevant of the shall be deducted or forfeir towards.  7. I/We hereby acknowledge towards any relevant bodies.  7. I/We hereby undertake the penalties and expenses of the shall of the shall be deducted of the about the shall be deducted on the shall be deducted or forfeir the shall be	reservation insure that ity shall retires will be ted if necessagents and property of the in due ge and ag COVID-19 to indemnifuce to more operating ge that the	n if it causes to venue is left frain from me responsibilities ary. Indoor employed or injury to or course. If ye that I we great that I we gregulations if y the manage of your and/or grocedures the management of the management	inconvenie t in a clean aking exce ty of the appears shall not death of a and/or my/ and Standa gement and my/our v ("SOP") se	ence to other and satisficant and satisficant and satisficant and satisficant and satisficant and satisficant operations and operations failed by the and satisficant and satisficant operations.	her Resider sfactory cor se which wi d shall inde d liable in n in the pre rs shall at a ating Proced her affected lure or nor authorities a	nts. Il disturbing the mnify to The leany manner demises and the multimes adhered ("SOP") If parties for an in-compliance and any relevant	ne residents.  Management;  whatsoever for ne party at faut re to strict come set by the aut ny liabilities, co of all or any ant bodies.	The deposit or loss of or lt shall fully pliance and horities and osts, claims, COVID-19
Applicant's Signature Date: FOR OFFICE USI	E ONLY							

Approved by:

[Manager]

Date:

Attended by:

[Front liner]

Date:

Acknowledged by:

[Security Officer]

Date: