

CONFERENCE & RECREATION CENTRE

BEDROOM LIST

Please complete the bedroom list, giving the Duty Manager a copy on arrival and keeping a copy for the group organiser thus complying with Fire Regulations.

A (4)	ROOM	NUMBER of Beds HOUSE	GUESTS NAME/S
	1*	2	
	2*	2	

B (20)	3	3 (Disabled)	
	4	3	
	5	3	
	6	3	
	7	3	
	8	4	

C (14)	9	4	
	10	1	
	11	4	
	12	4	
	14	1	

15	2	
16	3	
17	4	
18	2	
19	2	
20	4	
21	3	
22	2	

ROOMS SUITABLE FOR Z-BEDS	GUESTS NAME/S
1	
2	
8	
10	
11	

All bedrooms have ensembles except the following:

AREA	TOILET S	SHOWER S	WASH HAND BASIN S	LOCATIO N
A Rooms 1 & 2	1	1	1	Opposite bedroom 1

GROUP:

ORGANISER(S):

DATES:

SIGNATURE:

PLEASE *HIGHLIGHT * ON THE LIST ANY GUEST WHO HAS AN ALLERGY OR SPECIAL NEEDS , DETAILS TO BE PROVIDED SEPERATELY TO US.