

Date Rec'd:		
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Ref. No.: FRB / ____ / ____

APPLICATION FOR USING FUNCTION ROOM AT KOWLOON BAY TRAINING CENTRE

Please return this completed application form to CITA by e-mail: booking@cita.org.hk or fax: 2795 0452.

1. Booking of Function Rooms & Equipment

(Please put a \checkmark in the \Box as appropriate)

Fu	Inction Rooms	Floor	Function Room Charges (per session)	Equipment Required	Equipment Service Charges (per session)
				Visualizer LCD Projector Notebook Computer	
	Seminar Room	G/F	HK\$3,600	 Flip Chart / White Board Reception table(s): 1 table with 2 chairs or 2 tables with 4 chairs Others may be available on request. Please state 	
				Visualizer LCD Projector Notebook Computer	
	Lecture Hall	1/F	HK\$8,000	 Flip Chart / White Board Reception table(s): 1 table with 2 chairs or 2 tables with 4 chairs Others may be available on request. Please state 	
				□ Visualizer	
				LCD Projector Notebook Computer	
	Board Room	1/F	HK\$2,100	 Flip Chart / White Board Reception table(s): 1 table with 2 chairs or 2 tables with 4 chairs Others may be available on request. Please state 	
				□ Visualizer □ LCD Projector □ Notebook Computer	
	Exhibition Hall	2/F	HK\$6,000	Flip Chart / White Board Reception table(s): 1 table with 2 chairs or 2 tables with 4 chairs Others may be available on request. Please state	

	Others	Description	Charges	
	Additional	For Non-office Hour,	HK\$300	
	Service Charge	please state the number of non-office hour to be booked:	per hour	
 Schedule Available for Service (including set up & move out) Office Hour - Monday to Saturday (9:00 a.m 1:00 p.m. or 2:00 p.m 6:00 p.m.) 4 hours per session Non-office hour booking will be subjected to an additional charge. Overtime of 15 minutes or more will be charged at full hourly rate 				

2. Particulars of Applicant

Name of Organization /		
Company		
Name of Signatory	Mr / Ms* Pc	osition
Contact No.	Fa	ax No.
E-mail		
Correspondence Address		
(*Delete as appropriate.)		
3. Particulars of the Function		
Name of the Function		
Name of Organizer		
Type of the Function	□ Seminar/Workshop □ Meeting □ E	whibition D Others
Proposed Booking Date		
-		·
Proposed Booking Time (Including setup & move out)	AM Session (9:00 a.m. – 1:00 p.m.) Full-day: 2 sessions (9:00 a.m. – 6:00 p.m	PM Session (2:00 p.m. – 6:00 p.m .) Others (From to)
Estimate number of participants		

Rules, Terms and Conditions

1. Booking & Confirmation

All bookings should be made through the submission of this application form <u>10 working days</u> prior to the day of the function and bookings will be served on a first-come first-serve basis. A booking is valid only upon a confirmation letter is issued by CITA.

2. Overtime / Additional Charge

An overtime charge for out of office hour booking will be charged at an additional of HK\$300 per hour per room. Overtime of 15 minutes or more will be charged at full hourly rate.

3. Payment

The Payment should be made at least <u>5 working days before the date of event</u> by cheque of full amount payment payable to "Clothing Industry Training Authority" (CITA) unless with the prior approval of CITA. If the payment was settled via bank / telegraphic / electronic / wire transfer, all bank service charges should be borne by applicant.

4. Cancellation

i) An administrative charge of HK\$500 will be charged if a cancellation is made after submission of this application form. ii) A refund will be given after the deduction of HK\$500 administrative charge if a cancellation is made in writing at least <u>3 working days</u> prior to the event; otherwise the payment will be forfeited.

5. Applicants' Responsibilities

i) Applicant is responsible for all damages to the facilities, equipment or property in the function room(s). All costs in relation to repair or replacement of rented venue and equipment will be borne totally by the applicant. ii) Applicant is responsible for setting up and subsequent removal of the decoration/props, including banners, backdrops, posters, etc. iii) All functions should be non-profit making. Applicant is not allowed to sell any goods, publication or services in the area of CITA.

6. Disclaimer

i) CITA shall not accept any liability of death, injury, loss or damage which may result from the use of the function room(s). ii) CITA shall not be responsible for any loss of or damage to any property, goods, articles or things whatsoever placed, deposited, brought into or left upon the premises by the Applicant or any other person whomsoever. iii) CITA reserves the right to decline any booking in any circumstances and for whatever reasons. iv) The name and logo of CITA are not allowed to be shown on the promotional materials or publicity of the function without prior permission of CITA.

7. Bad Weather Arrangement

If the Typhoon Signal no. 8 or above / Black Rainstorm Warning is hoisted before the booked session, all venues will be closed. If the Typhoon Signal no. 8 or above / Black Rainstorm Warning is hoisted after the start of the booking time, the event may continue at the discretion of the tenant until the end of that event. However, CITA will not be held responsible for the safety of participants. If the Typhoon Signal no. 8 or above / Black Rainstorm Warning is lowered at the following hours, venues will be opened as appended below:

- Warning signal is lowered before 6:30 a.m. : All venues for morning session (9am - 1pm) will be opened as scheduled.

- Warning signal is lowered before 11:00 a.m. - All venues for afternoon session (2 – 6pm) will be opened as scheduled.

Should the situation arises when the tenant needs to reschedule the event date and time due to Typhoon Signal no. 8 or above / Black Rainstorm Warning, the rearranged date and time will subject to availability of the CITA's venue.

□ I agree to observe and abide by all the Rules, Terms and Conditions of using the Function Room(s) and Equipment stated therein.

Date	Signature of Signatory	Organization / Company Chop	
FOR CITA USE ONLY	FOR CITA USE ONLY	FOR CITA USE ONLY	
Function Room Service Charges:	(
Equipment Service Charges:			
Additional Services Charges:	(for Non-offic	e Hours / Overtime Charge) Total	
Amount :			
Confirmed by :	Approved by :		
Signature 8	& Date	Signature & Date	