

Client Agreement

WK EVENING MANAGEMENT

Full Name (s) _____ Date _____
Telephone _____ Nominated First Aider _____
Email Address _____ Wedding Coordinator _____
Guest numbers (night before if applicable) _____ Notes _____
Guest numbers (wedding day) _____

Need to Know

As your evening event manager, I help ensure the safety and security of your guests, suppliers, and contractors at the venue. I believe you have agreed with the venue owners to be liable for any loss or damage (including personal injury) to the venue, your guests, contractors and suppliers during your hire period. For me to protect your interest, I have put the following in place:

- I am a registered first aider
- I have full public liability insurance (but this will exclude claims involving wilful damage or where the party has ignored my advice or warning signage, for example)
- You authorise me to ensure that guests vacate public spaces 20 minutes after the event ends or the bar doors close (when my liability to you ceases); guests are welcome to continue to chat and socialise in their rooms after this point

Please tick any of the following that apply

Night Before Basis

- ☐ B and B
- ☐ Stables & Grounds
- ☐ Main Venue
- ☐ Library bar open
- ☐ Stables bar open

Bar Times Night Before

(Please specify the times agreed with Bacchus - Please note that your event will end 30 minutes after the bar last call)

Where are you planning on having your catering service the night before.

Day of Wedding

- ☐ Small dance floor
- ☐ Big dance floor
- ☐ Fireworks
- ☐ Sparklers
- ☐ Photo booth Bacchus
- ☐ Photo booth - Other
- ☐ Fire pit
- ☐ Little Green Hut
- ☐ Other evening caterer

Evening Bar times for wedding day

(Please specify the times agreed with Bacchus - Please note that your event will end 30 minutes after the bar last call)

☐ Do you have a nightcap?

Have you arranged any entertainment for the night before or wedding day? please specify including contact details or if you are bringing it yourselves.

	NAME	CONTACT
<input type="checkbox"/> DJ		
<input type="checkbox"/> BAND		
<input type="checkbox"/> OTHER		
<input type="checkbox"/> OTHER		

Extra Notes:

Entertainment check-in

- ☐ 6 pm
- ☐ Earlier**
- ☐ All SIA's sent to WK
- ☐ Sleeping guest list sent to WK
- ☐ Have you sent the Supplier Agreement form to all of your suppliers that are not on our recommended list ?

****I/We declare that I have read and understand this form thoroughly. All the answers are correct and accurate to the best of my/our knowledge. I/We undertake to supply Wilson Kagaruki with a completed Suppliers Information Agreement for every evening entertainment act or supplier I/We engage.***

***** Subject to an additional charge***

Client's Signature* (one may sign
for both)


Wilson Kagaruki