



Office/Boardroom Rental Form

Please complete form and fax to 604-971-0209 or scan to info@simplyoffice.ca

COMPANY INFORMATION:

Company Name:	
Current Address:	
Business Type:	
Website Address:	Email Address:
Telephone Number:	Fax Number:

PERSONAL INFORMATION:

Full Name:	Email Address:
Telephone Number:	Cell Number:
Home Address:	

DESIRED BUSINESS CENTRE LOCATION: Waterfront Harbourfront Canada Place

Office Rental <input type="checkbox"/>	Boardroom Rental <input type="checkbox"/>
Date:	
Start Time:	End Time:
Additional services required: Refreshments (Flat rate of \$10 additional per person) <input type="checkbox"/> Catering <input type="checkbox"/>	
Other – please specify:	

PAYMENT INFORMATION:

Credit Card Information (Please note there is a 4% additional charge if paying by credit card):	
Visa Card <input type="checkbox"/> MasterCard <input type="checkbox"/> Other <input type="checkbox"/> (No charge if paying by e-transfer, cash or cheque)	
Credit Card Number:	
Expiry Date:	CVV/CVS Number:
Name as it appears on Credit Card:	
Address where card is registered:	

_____ Signature	_____ Date
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