



KIRRIBILLI CLUB

11 Harbourview Crescent Lavender Bay
PO Box 565 Milsons Point 1565
Ph: 02 9955 2245 Email: functions@kirribilliclub.com.au

We support the Responsible Service of Alcohol (RSA)
and the Responsible Conduct of Gaming (RCG)

FUNCTION EVALUATION FORM

The Kirribilli Club values your feedback. Please take the time to complete this short evaluation form.

The Function team carefully review all feedback from our clients and are always looking for ways to improve our service and ensure that the highest standard is provided on all occasions.

| | EXCELLENT | V GOOD | GOOD | FAIR | POOR |
|--|-----------|--------|------|------|------|
| PLANNING OF FUNCTION | | | | | |
| Initial contact | | | | | |
| Identified and responded to your needs | | | | | |
| Prompt communication | | | | | |
| ON THE DAY | | | | | |
| Set up as required | | | | | |
| Response to specific needs on the day | | | | | |
| Resources/Audio Visual as required | | | | | |
| Catering | | | | | |
| Value For Money | | | | | |
| Professional staff | | | | | |
| Overall Satisfaction | | | | | |

COMMENTS

NAME

COMPANY

DATE OF FUNCTION

Thank you for your time in completing this form. Please return to the Club via the following methods:

HAND IT TO RECEPTION WHEN YOU VISIT THE CLUB

EMAIL BACK TO THE CLUB – functions@kirribilliclub.com.au

FAX BACK TO THE CLUB – 02 9955 3755