

VIDEO CONFERENCE BOOKING SHEET

Date: _____

Company Name: _____

Client Name: _____

Booking made by: _____

Telephone No.: _____

Fax No.: _____

Email: _____

VC Time Start: _____ VC Time End: _____

Number of delegates _____

*Far Site ISDN VC No.: _____ Bandwidth _____

Dialing rule: Local site: Making [] **OR** Receiving [] the call

**Number of sites/venues: _____

TEST CALL INFO

Far Site VC contact name _____

Far Site Contact No.: _____

Test Call Time: _____

Test Call Date: _____

Will you be doing presentations via the vc call? _____

Display System Type: _____

Special Requests: _____

Client Signature: _____ Signature: _____

*The Far site is the venue to which the video conference call will be made

** The number of sites participating in the video conference