



Classroom & Office Facilities Rental Application Form

Applicant Information

Full Name: _____
Business Name: _____
Phone Number: _____
Email Address: _____
Clinic/ Residential Address: _____

Room Selection

Room Options:

- Double Classroom (50-60 sqm) \$250 NZD/day - Equipment: WiFi, Laptop, Projector
- Large Classroom (120 sqm) \$400 NZD/day - Equipment: WiFi, Laptop, Projector, Smart TV, Camera
- Entire Unit \$550 NZD/day - Includes: 2 Double Room, 1 Large Room, Kitchen, Waiting Lounge
- Boardroom \$200NZD/half day, \$350NZD/full day – Includes: meeting table, 8 chairs, whiteboard & pens, WiFi, laptop, projector, microphone for Zoom meetings

Additional Equipment Rental

- Massage table (\$5 each)
- Acupuncture Equipment (Price to be confirmed)
- Yellow Recycle Bin (\$2 each)

Rental Duration

Usage Time: 8:00 AM - 6:00 PM (full day)

Start Date: _____

Total Days: _____

End Date: _____

Reason for use: _____



新 西 蘭 中 醫 學 院
New Zealand College of Chinese Medicine

Signature and Date

Applicant Signature: _____

Additional Information (if applicable):

For Office Use Only:

| **Application Received By:** | _____ | **Date Received:** | _____ |