OFFICE USE ONLY



## APPLICATION FOR HIRE OF SPORTING FACILITIES, HALLS AND COMMUNITY CENTRES, PARKS AND RESERVES

HIRERS DETAILS:  Name:	ary / er of
Phone (H): Phone (W): Mobile:  Email: (Name of Club or Organisation)  If acting on behalf of a Club/Organisation what is your position on the Committee: President / Secreta Treasurer / Other. If you do not hold a position on the Committee, then you must provide a lett Authorisation from the Club or Association to act on their behalf.  FACILITY REQUIRED:  SPORTING FACILITY  HALLS & COMMUNITY CENTRES  PARKS & RESERVE Facility Name: Finishing Time:	ary / er of
Phone (H): Phone (W): Mobile:  Email: I have been authorised to act on behalf of:	ary / er of
Phone (H): Phone (W): Mobile:  Email: I have been authorised to act on behalf of:	ary / er of
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SPORTING FACILITY HALLS & COMMUNITY CENTRES PARKS & RESERVE Facility Name:  Date of Hire:Starting Time:Finishing Time:	'ES 🗖
Facility Name:  Date of Hire: Starting Time:Finishing Time:	
Date of Hire:Starting Time:Finishing Time:	
Purpose of Hire:	
(Wedding, 21st Birthday, Football, Cricket etc)	
SEASONAL/ANNUAL HIRERS: (SEASONS: SUMMER 1 October to 31 March, WINTER 1 April to 30 September)	
Weekly  Monthly  Bi-Monthly  B	nthly 🗖
Jan 🗖 Feb 🗖 Mar 🗖 Apr 🗖 May 🗖 Jun 🗖 Jul 🗖 Aug 🗖 Sep 🗖 Oct 🗖 Nov 🗖	Dec 🗖
Sunday  Monday  Tuesday  Wednesday  Thursday  Friday  Satur	day 🗖
Commencement Date: Final Date:	
Starting Time: Finishing Time:	
FOLLOWING IS APPLICABLE TO SPORTING FACILITY HIRERS ONLY	
FIELD NUMBERS/AREAS REQUIRED:	
COMPETITION DAYS: Day: Time:	
Day: Time:	
Training: Day: Time:	
Day: Time:	
Day: Time:	
Day: Time:	

<sup>\*\*</sup> Semi Finals/ Finals: A separate application is to be made during the season \*\*

SIGNATURE:

## Updated 23 August 2013 Additional Information Required: Number of members/teams/competitors in senior/junior groups: Will alcohol be consumed during the function? YES / NO Will alcohol be available for sale during the function? YES / NO If YES, have you obtained the appropriate Liquor Licenses (for further information regarding the requirements please contact Council)? INSURANCES - SEASONAL/REGULAR HIRERS/CASUAL HIRERS: Please provide a copy of your Club/Organisations Public Liability Insurance policy (minimum coverage required \$10,000,000) with your application. Public Liability: Insurer:\_\_\_\_ Policy No: Expiry Date: Yes, I have attached a photocopy of my Public Liability Insurance Casual Hirers Insurance may be available. Please contact Council for further information. **KEYS:** There is a refundable key deposit of \$25.00 per key issued. Number of keys required: Nominated person(s) to be responsible for keys Person 2 Person 1 Name: Name: Address: Address: (H): Phone: Phone: (W): \_\_\_\_\_ (W): \_\_\_\_\_ (M): (M): APPLICATIONS FOR HIRE MUST BE MADE BY PERSONS OVER 18 YEARS OF AGE. THE MANAGEMENT COMMITTEE OR COUNCIL RESERVE THE RIGHT TO CANCEL APPROVAL TO HIRE, IF: PAYMENT IS NOT MADE BY THE DUE DATE: ANY SIGNIFICANT CHANGE TO THE ORIGINAL INTENDED PURPOSE FOR THE USE OF THE FACILITY OCCURS; THE CONDITIONS OF HIRE ARE BREACHED. PLEASE READ THE ACCOMPANYING CONDITIONS FOR HIRE CAREFULLY. IF YOU DO NOT UNDERSTAND ANY PART OF THE DOCUMENT, PLEASE CONTACT THE MANAGEMENT COMMITTEE OR COUNCIL WHO WILL EXPLAIN THE DETAILS FOR YOU. WE UNDERTAKE TO BE RESPONSIBLE FOR PAYMENT OF THE FEES AND CHARGES FIXED BY COUNCIL FOR HIRE OF THE FACILITIES AND FOR THE PAYMENT OF ANY OTHER CHARGES OUT OF THE CLUB'S OR ORGANISATION'S HIRE THEREOF, IN ACCORDANCE WITH THE RULES AND CONDITIONS OF HIRE APPLYING TO HIRE OF SPORTING FACILITIES, HALLS AND COMMUNITY CENTRES, AND PARKS AND RESERVES, A COPY OF WHICH HAS BEEN SUPPLIED TO US AND WHICH WE AGREE SHALL APPLY TO AND FORM THE BASIS OF THIS APPLICATION. **PRIVACY STATEMENT** WOLLONDILLY SHIRE COUNCIL IS COLLECTING PERSONAL INFORMATION FROM YOU ON THIS FORM FOR THE PURPOSE OF ASSISTING THE DETERMINATION PROCESS OF YOUR APPLICATION. THIS INFORMATION IS REQUIRED BY LAW AND FAILURE TO PROVIDE THE INFORMATION MAY LEAD TO REJECTION OR DELAYS OF YOUR APPLICATION. AT ANY TIME YOU HAVE THE RIGHT TO ACCESS, VIEW OR CORRECT THE PERSONAL INFORMATION THAT YOU HAVE PROVIDED. PLEASE ALSO NOTE THAT INFORMATION SUPPLIED ON THIS DOCUMENT MAY BE THE SUBJECT OF A REQUEST TO ACCESS INFORMATION UNDER THE GOVERNMENT INFORMATION (PUBLIC ACCESS) ACT 2009 [GIPAA]. YES, I HAVE READ AND UNDERSTOOD THE CONDITIONS OF HIRE FOR SPORTING FACILITIES, HALLS AND COMMUNITY CENTRES, OR PARKS AND RESERVES.

PRINT NAME:

DATE: