

Application for Hire

Shepparton Library Multi Purpose Meeting Room

ALL HIRERS TO COMPLETE

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|---|---|--|---|
| Organisation Name/Group: | | | |
| Contact Name: | | | |
| Address: | | | |
| Postcode: | Mobile: | A/H: | |
| Email: | | | |
| Category of user: | | | |
| Library <input type="checkbox"/> Associates (Not for profit) | Community <input type="checkbox"/> Groups/Individuals (Charitable/social) | Community <input type="checkbox"/> Organisation (Not for profit) | Business <input type="checkbox"/> Organisation (For profit) |
| Is your organisation/group incorporated? Yes <input type="checkbox"/> | | | No <input type="checkbox"/> |
| Does your organisation/group have Public Liability Insurance? Yes <input type="checkbox"/> | | | No <input type="checkbox"/> |
| If Yes, a Certificate of Currency for your organisation's Public Liability Insurance Policy MUST be attached. | | | |
| Please refer to Terms and Conditions of Hire Section 23. | | | |

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| Doc Name: Shepparton Library Multi purpose Meeting Room Application for Hire | | Prepared By: | |
| Status: DRAFT | Review Date: | Issue Date 15/9/15 | Approved By: |

CASUAL BOOKING HIRERS TO COMPLETE

| | |
|--|---|
| Date/s & Times: | |
| Area/s required: Room | Meeting <input type="checkbox"/> Kitchen <input type="checkbox"/> |
| Number or people attending: | |
| Purpose of Booking: | |
| Will alcohol be consumed at the event: Yes <input type="checkbox"/> No <input type="checkbox"/> | |

REGULAR USE HIRERS TO COMPLETE

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|--|---|
| Date/s & Times: | |
| Area/s required: | Meeting Room <input type="checkbox"/> Kitchen <input type="checkbox"/> |
| Frequency: | Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> |
| Number or people attending: | |
| Purpose of Booking: | |
| Will alcohol be consumed at the event: Yes <input type="checkbox"/> No <input type="checkbox"/> | |

ALL HIRERS TO COMPLETE

I,, the undersigned agree to ensure that all individuals, members and groups using the meeting room as a result of this booking request, will comply with all conditions of use. I have read the Terms and Conditions of Hire.

Signed

Date

Please return to Shepparton Library
41 - 43 Marungi Street
PO BOX 632
Shepparton Vic 3632

Shepparton Library Team Leader Signature

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Date

CONDITIONS OF USE
Public Liability Insurance