



HIRE OF COUNCIL FACILITIES FORM

NAME OF BUILDING/RECREATIONAL RESERVE/ PARK REQUIRED (Please tick)

- | | |
|--|---|
| <input type="checkbox"/> Town Hall (inc Stage) | <input type="checkbox"/> Currie Football Pavilion |
| <input type="checkbox"/> Supper Room/Kitchen | <input type="checkbox"/> Council Chambers |
| <input type="checkbox"/> KI Racecourse Complex | <input type="checkbox"/> Other |
| <input type="checkbox"/> Recreation Reserve/Park | |

TYPE OF USE

- | | |
|--|---|
| <input type="checkbox"/> Casual Basis | <input type="checkbox"/> Seasonal Basis |
| <input type="checkbox"/> Private Hirer | <input type="checkbox"/> Commercial Hirer |

Example: (Not an exhaustive list) Casual event - happening no more than 6 times annually. Seasonal - daily, weekly, fortnightly or monthly use through hirer's agreement. Private - weddings, birthdays. Commercial - sporting activities, performances by performers or entertainers, rock/pop concerts.

DETAILED DESCRIPTION OF USE (required for insurance purposes)

EVENT COORDINATOR

Name of Organisation:

Name of Coordinator:

Address:

Suburb:

Postcode:

Telephone:

Mobile:

Email:





KING ISLAND COUNCIL

DATES FOR USAGE (please include dates for any setting up or decoration)

Start Date:	End Date:
Starting Time:	Finishing Time:

ADDITIONAL REQUIREMENTS

- | | |
|--|--|
| <input type="checkbox"/> Data Projector | <input type="checkbox"/> Screen |
| <input type="checkbox"/> Tea/Coffee facilities | <input type="checkbox"/> Plates/Crockery |

EVENT INFORMATION

Supplementary community groups that will be used in conjunction with carrying out the event:

e.g. Ambulance, Fire Services, SES

User groups that will use facilities:

e.g. school children, registered users, general public etc.

Estimated number of people attending:

PUBLIC LIABILITY INSURER

- | |
|---|
| <input type="checkbox"/> I have attached a copy of my current Certificate of Currency |
| <input type="checkbox"/> Current Certificate of Currency |
| <input type="checkbox"/> I would like contact details for Local Community Insurance Services |
| <input type="checkbox"/> I do not believe I require public liability insurance.
Please provide a reason below: (Casual Hirers and Internal Bookings) |

Insurers name:	Amount Insured:
Term of Insurance:	





Additional Permits Required?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
Type of Permit:	<input type="checkbox"/> Liquor License
	<input type="checkbox"/> Food
Permit Number:	
Additional Information:	

KEYS

Date Issued:
Name:
Signature:

OFFICE USE ONLY

Booking received:	Taken by:
Bond Amount:	Receipt No:
Hire Charges:	Receipt No:
Account Sent:	Amount:
Application Approved:	Date Notified:

