

APPLICATION FOR HIRE

July 2010

RECEIVED BY
Name: _____
Date: _____

Please fill in both sides of this form including signature and date

Note: This form is an application. It is NOT a booking.

Following a successful application, the booking will be confirmed.

1. Name of Organisation: _____
2. Name of Contact Person: _____
3. Position Held: _____
4. Address: _____ Post Code: _____
 Email: _____ Ph: (h) _____ (m) _____
5. Alternative Contact Name: _____ Ph: (h) _____ (w) _____
6. Name and Type of event(s) _____
7. Date(s) required (attach a list if insufficient space)

Please note the centre is closed Good Friday, Christmas Day & New Years Day. Public Holiday operating hours may vary.

Date(s)	Time	Date(s)	Time	Date(s)	Time

*** Including school holidays Yes / No**

*** Including Public holidays Yes / No**

8. Facilities required- Please tick the appropriate box for facilities required. Numbers refer to room/court identification numbers.

SPORTS HALL (Description of activity)	TENNIS COURTS	SQUASH
Full > _____	1	1(Exhibition court)
Half > _____	2	2(Exhibition court)
Badminton - Number of courts: _____	3	3
MAIN POOL	4	4
Lane 0 Lane 5	OUTDOOR OVAL	5
Lane 1 Lane 6	Full	
Lane 2	MULTI-PURPOSE ROOMS	Group Training Facility
Lane 3	Group Fitness Studio	RPM Room
Lane 4	Aerobics Room	Crèche

9. Equipment Required: Yes / No

If yes please attach a list of setting out details and requirements. Please note it is a condition of hire that the cost for any damage/repair occurring to this equipment will be billed back to the hirer. Please sign that you accept this condition.

10. Changing room facilities required: Yes / No

OTHER INFORMATION: _____

PUBLIC LIABILITY INSURANCE

Current Insurance (attach current policy)

Please note: Active Leisure Centre requires all commercial and community group hirers to have a minimum of \$20 million Public Liability Insurance.

Type of insurance and limit of liability	Company Name	Policy Number	Inception and expiry Dates

Note: A Risk Rating can be applied for in order to reduce the minimum requirement to \$10 million Public Liability Insurance at;

www.insuranceriskadvice.act.gov.au

The results of which must accompany this paperwork in order to have the minimum requirement reduced.

HIRERS CONDITIONS

If this application is approved, I the Hirer, undertake to comply with the following conditions;

- to indemnify and keep indemnified the Australian Capital Territory from any cost, expense or liability arising from this hire,
- to restrict use of the building/equipment to that specified in this hire of facilities form,
- to understand and comply with obligations of the Copyright Act 1968,
- to comply with all reasonable requests made by staff of the Active Leisure Centre,
- to give one months notice of a ‘permanent’ booking termination (excluding permanent squash bookings),
- to give 24 hours notice of any ‘one off’ variations or cancellations,
- to accept Active Leisure Centre may with adequate notice cancel, modify or relocate any booking of the facility,
- A \$50.00 cleaning fee will be charged to any hirer whom centre management feels has left an unacceptable mess behind after the hire.

I agree that under no circumstances is smoking or alcohol consumption permitted on Active Leisure Centre premises. Further, I understand that non-compliance with this request could mean immediate termination of the existing booking as well as any future bookings.

PAYMENT ARRANGEMENTS (please tick)

‘As you go’ over the Counter *

Monthly Invoice

Other: (Subject to approval) _____

Please give any relevant details for payment including, addressee, postal / e-mail address, etc.

*** Please Note:** A \$100.00 deposit is required to secure a booking if your payment option is ‘as you go ‘over the counter payment. The cost of late cancellations and no shows will be deducted from this deposit and you will be contacted if you need to make another one due to this reason.

All Permanent bookings are renewable at the end of the calendar year.

No bookings will be held without a current booking form.

HIRER’S SIGNATURE

_____ Signature _____ Date _____

Office Use Only

Booking No. _____

Entered on Computer YES / NO Confirmed: YES / NO Date:

Deposit Received: YES / NO Staff: