

## CONTACT DETAILS

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Ph: (home) \_\_\_\_\_

Ph: (mobile) \_\_\_\_\_

Ph: (work) \_\_\_\_\_

Email: \_\_\_\_\_

## BOOKING INFORMATION

What do you wish to hire?

Function room

Kitchen Services

Bar Services

Type of Event or Activity \_\_\_\_\_

Number of attendees: \_\_\_\_\_

Date requested: \_\_\_\_\_

Start time: \_\_\_\_\_

Finish time: \_\_\_\_\_

Total time requested:

*(Time must include set up and pack away time)*

Will there be any temporary structures or seating erected (*i.e. marquees, staging, lighting, etc.*) If yes, provide details:

Will there be any noise creating devices (*i.e. Speakers, live bands, DJ, loud machinery etc.*) If yes, provide details:

Will there be a bouncy castle at this function? If yes, please provide a copy of the hiring company's public liability insurance.

Will you require any heavy vehicle or truck access? \_\_\_\_\_

*\*Approval will be required from the City of Rockingham's Parks Department*

Other equipment you may be bringing into the facility: \_\_\_\_\_

*Please note that the Council does not permit amusement rides, bouncy castles, smoke or bubble machines within buildings*

Written confirmation will be provided once your booking has been confirmed. Please note this application does not secure a booking.

**DISCLAIMER**

I agree that I have read the SHDSA Terms and Conditions of Hire and agree to abide by the Terms and Conditions of Hire, and be responsible for payment of all fees and charges associated with this hire.

Signature:

Date: