GLADSTONE REGIONAL COUNCIL
MT. LARCOM HALL
HIRE AGREEMENT

July 2011

The Gladstone Regional Council is collecting your personal information to process this request. The information will be only accessed by authorised council employees. Some information may be provided to the nominated financial institution for the same purpose. Your information will not be given to any other person or agency unless you have given us permission or we are required by law.

Organisation/Group: .....

Type of function: .....

Contact Name 1: .....

Address: .....

Phone: (h).....(w) .....

(Mob).....(Fax).....

Email: ……

Contact Name 2: .....

Address: .....

Phone: (h).....(w) .....

(Mob).....(Fax).....

Email: ……

Date of hiring .....……

Function Time from…….. ……... … To……..

Setting up from…….. ……... … To……..

Clearing of room from…….. ……... … To……..

Half an hour either side of your function is allowed for setting up and clearing
Extra time may be allowed for larger functions upon consultation with the Co-ordinator

Does your organisation have Public Liability Insurance: Yes□

No□ (attach Casual User form)

You may only tick NO if your group uses the facility *less than* ten times in 12 months. If you tick NO a "Casual Users" form needs to be completed.

Public Liability Insurance is required for all groups using the facility more than ten times in a 12 month period. Please refer Conditions of Hire.

I ..... of ..... hereby make application for the premises set out in the Schedule overleaf for the day and the times specified in the Schedule and I acknowledge having received and read a copy of the relevant Gladstone Regional Council Venue Hire Conditions and Emergency Evacuation Procedure. I undertake to be bound by and comply with these documents in every respect and I further undertake to be responsible for ensuring that all individuals or groups using the premises in association with this application shall comply with these Conditions.

....

Signature of Hirer Date

OFFICE USE ONLY				
Bond required RC 154	Yes No	Receipt no Amount of bond Payee (name on receipt)		
Fees paid RC 56	Date paid		Amount paid	Receipt No.