



CORRIGIN RECREATION & EVENTS CENTRE BOOKING APPLICATION FORM

Please complete all sections of this form and return to the Shire of Corrigin for determination of hire costs and CEO approval (see conditions of hire)

PART A – HIRER DETAILS

First Name				
Surname				
Organisation Name				
Address				
Suburb	State		postcode	
Email				
Phone				

PART B – FUNCTION DETAILS

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1	AREAS OF USE							
	North Wing		Function Area		South Wing		Sports Hall	
	Change Room 1	<input type="checkbox"/>	Kitchen	<input type="checkbox"/>	Change Room 3	<input type="checkbox"/>	Basketball	<input type="checkbox"/>
	Change Room 2	<input type="checkbox"/>	Bar	<input type="checkbox"/>	Change Room 4	<input type="checkbox"/>	Netball	<input type="checkbox"/>
	Meeting Room 1	<input type="checkbox"/>	Function Area	<input type="checkbox"/>	Meeting Room 2	<input type="checkbox"/>	Badminton	<input type="checkbox"/>
	Umpire/1 st Aid Room	<input type="checkbox"/>		<input type="checkbox"/>	Squash Courts	<input type="checkbox"/>	Volleyball	<input type="checkbox"/>
						Function*		
		DATE		START TIME		FINISH TIME (1am Max, incl cleanup)		
2	Setup:							
	Function:							
	Pack down / Cleanup:							
	Vacate:							
	Please provide the names of 3 contacts who will be present on the day and be able to communicate with Council staff, if required							
	Name 1				Contact Details			
Name 2				Contact Details				
Name 3				Contact Details				
3	Number of People Attending (approximate): _____							
4	Type of Function:							
	Birthday ____Age	<input type="checkbox"/>	Meeting/Seminar	<input type="checkbox"/>	Wedding	<input type="checkbox"/>	Dinner	<input type="checkbox"/>
	Markets	<input type="checkbox"/>	Recreation	<input type="checkbox"/>	Service / Wake	<input type="checkbox"/>	Presentation Night	<input type="checkbox"/>
	Fundraiser	<input type="checkbox"/>	Please specify activities					
	Commercial Activity	<input type="checkbox"/>	Other <input type="checkbox"/> Please specify					

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		YES	NO
5	Will the applicant (or anyone on their behalf) be providing food or drinks at the function? <i>If yes, please answer Q8, Q9 and Q10</i>	<input type="checkbox"/>	<input type="checkbox"/>
6	Will the applicant (or anyone on their behalf) be Selling food or drinks at the function? <i>If yes, please answer Q8, Q9 and Q10</i>	<input type="checkbox"/>	<input type="checkbox"/>
7	Will any food and/or alcohol be provided as part of a Fee Charge for entry to the function? <i>If yes, please answer Q8, Q9 and Q10</i>	<input type="checkbox"/>	<input type="checkbox"/>
8	Does the application have a current Food Act Registration with the Shire of Corrigin?	<input type="checkbox"/>	<input type="checkbox"/>
9	Does the application have a current Food Act Registration with another Council? <i>if yes, please provide a copy as part of the application</i>	<input type="checkbox"/>	<input type="checkbox"/>
10	Will the function be catered for by a registered catering food business?	<input type="checkbox"/>	<input type="checkbox"/>
	Food Business / Trading Name:		
	Food Act Registering Council:		
	Contact Person:		
	Phone: _____ Email: _____		
11	Will alcohol be provided at the event / function?	<input type="checkbox"/>	<input type="checkbox"/>
12	Will alcohol be available for sale?	<input type="checkbox"/>	<input type="checkbox"/>
13	Will people attending the function be bringing BYO food?	<input type="checkbox"/>	<input type="checkbox"/>
14	Will people attending the function be bringing BYO alcohol?	<input type="checkbox"/>	<input type="checkbox"/>
15	Do you need some information about safe handling of food?	<input type="checkbox"/>	<input type="checkbox"/>
16	Do you or any/or other users within your group require an induction on the use of the kitchen appliances? *fees may apply	<input type="checkbox"/>	<input type="checkbox"/>

PART C – FUNCTION AREA REQUIREMENTS & USAGE

		YES	NO
17	Will the applicant be setting up a stage?	<input type="checkbox"/>	<input type="checkbox"/>
18	How many banquet tables do you require?		
19	How many trestles do you require?		
20	How many chairs to you require?		
21	Do you require a lectern?	<input type="checkbox"/>	<input type="checkbox"/>
22	Do you require a microphone?	<input type="checkbox"/>	<input type="checkbox"/>
23	Do you require a PA / Music System	<input type="checkbox"/>	<input type="checkbox"/>
24	Do you require a projector screen?	<input type="checkbox"/>	<input type="checkbox"/>
25	Will you be providing any of the below at your function? Band <input type="checkbox"/> DJ <input type="checkbox"/> Sound / lighting <input type="checkbox"/> Stalls <input type="checkbox"/> Photo Booth <input type="checkbox"/> Roving Entertainers <input type="checkbox"/> Other <input type="checkbox"/>		



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PART D – PAYMENT

		YES	NO
27	Application is made that the Fees & Charges associated with this booking be invoiced to the Business / Club / Group.	<input type="checkbox"/>	<input type="checkbox"/>
	Fees & Charges associated with this booking will be paid in advance, as per the Hirers Terms & Conditions	<input type="checkbox"/>	<input type="checkbox"/>

PART E – DECLARATION

Signed on behalf of the Hirer;

I confirm that:

- All the information provided on this form is true and correct.
- I have read, understood and accept the Hirer's Terms and Conditions.
- Where the Hirer is a company or incorporated association, I am authorized by the Hirer to complete the Application form on the Hirer's behalf.
- I am personally responsible for ensuring that the Hirer complies with these conditions, and if the Hirer breaches any of these conditions, I will be personally responsible for ensuring that the Hirer remedies any such breaches, including any damage to the Facility.
- That the booking is tentative until confirmed by the Shire of Corrigin In writing.

Signature: _____ Date: _____

Name: _____

Office Use only

Function deemed suitable for the CREC and its capacity?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has liquor approval been received by the Shire	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Food Act Registration appropriate for activity?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
EHO advised and appropriate action commenced?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Booking recommended	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Booking confirmed in writing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Payment to be invoiced authorised	<input type="checkbox"/> Yes	<input type="checkbox"/> No