

Council Facility User Application and Agreement

Facility Details					
Name of Facility					
Address/Locatio					
Type of Facility	Recreation Reserve	☐ Hall ☐ Park ☐	Pool Other:		
User Details					
Organisation Na	me				
Postal Address					
Website					
Affiliated Association/League					
Name					
Association Sec	etary				
Postal Address					
Phone		Mobile			
Email		Fax			
Details of Use					
B 1 1 411					
Period of Use	Summer	Winter Schoo	I Other: ——		
Period of Use	Summer Season	Winter Schoo Season Term	Other: ———		
Period of Use Purpose of Use:	Season				
	Season	Season Term	g, school sports)		
Purpose of Use:	Season (i.e	Season Term e. football/netball, training Wed Thurs F	g, school sports)		
Purpose of Use:	Season (i.e	Season Term e. football/netball, training Wed Thurs F	ri Sat Sun		
Purpose of Use: Training Dates:	Season (i.e. Mon Tues Start Date: From:	Season Term e. football/netball, training Wed Thurs F am/pm	ri Sat Sun Finish Date:		
Purpose of Use: Training Dates: Times:	Season (i.e. Mon Tues Start Date: From:	Season Term F. football/netball, training Wed Thurs Fri am/pm Wed Thurs Fri	ri Sat Sun Finish Date:	am/pm	
Purpose of Use: Training Dates: Times: Competition	Season (i.e. Mon Tues Start Date: From: Mon Tues	Season Term e. football/netball, training Wed Thurs F am/pm Wed Thurs Fri	ri Sat Sun Finish Date: To:	am/pm	
Purpose of Use: Training Dates: Times: Competition Dates: Times:	Season (i.e. Mon Tues Start Date: From: Start Date: From:	Season Term Let football/netball, training Wed Thurs F am/pm Wed Thurs Friam/pm	ri Sat Sun Finish Date: Sat Sun To: To: To: To: To: To:	am/pm	
Purpose of Use: Training Dates: Times: Competition Dates: Times: School Use	Season (i.e. Mon Tues Start Date: From: Start Date: From: Mon Tues Mon Tues	Season Term Season Term Season Term Analysis of the season Term Thurs Friends	ri Sat Sun Finish Date: Sat Sun Finish Date: To: Sat Sun Finish Date: To: To: Sat Sun	am/pm	
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Purpose of Use: Training Dates: Times: Competition Dates: Times: School Use Dates: Times: Other Use Dates: Times:	Season (i.e. Mon Tues Start Date:	Season Term a. football/netball, training Wed Thurs Fri am/pm	ri Sat Sun Finish Date: To: To: To: To: To: To: To: To: To: To	am/pm am/pm am/pm am/pm	

Version Number 1.0.0 Date of Issue 5 June 2018 Review Date As Required

Document Name

CORP – Council Facility User Application & Agreement

Contact Details				
Nominated Primary Contact				
Postal Address				
Phone	Mobile			
Email	Fax			
If applicable				
President				
Postal Address				
Phone	Mobile			
Email	Fax			
Secretary				
Postal Address				
Phone	Mobile			
Email	Fax			
-				
Treasurer				
Postal Address				
Phone	Mobile			
Email	Fax			
Information for Public Release				
Information for Public Release				
Information for Public Release Organisation Name				
Organisation Name				
Organisation Name Contact Name Contact's Role				
Organisation Name Contact Name Contact's Role				
Organisation Name Contact Name Contact's Role Postal Address	Mobile			
Organisation Name Contact Name Contact's Role Postal Address Phone	Mobile Fax uding public contact details) will not be distributed to anybody			
Organisation Name Contact Name Contact's Role Postal Address Phone Email For privacy purposes, the contact details provided above (exclusive provided above)	Mobile Fax uding public contact details) will not be distributed to anybody			
Organisation Name Contact Name Contact's Role Postal Address Phone Email For privacy purposes, the contact details provided above (excluding outside of Greater Hume Council (GHC) except in extenuating	Fax uding public contact details) will not be distributed to anybody circumstances.			
Organisation Name Contact Name Contact's Role Postal Address Phone Email For privacy purposes, the contact details provided above (excluding outside of Greater Hume Council (GHC) except in extenuating Payment Arrangements I/We the Hirer agree to pay \$ per understand payment is to be made at the time of booking	Fax uding public contact details) will not be distributed to anybody circumstances.			
Organisation Name Contact Name Contact's Role Postal Address Phone Email For privacy purposes, the contact details provided above (excluding outside of Greater Hume Council (GHC) except in extenuating Payment Arrangements I/We the Hirer agree to pay \$ per understand payment is to be made at the time of booking	Mobile Fax uding public contact details) will not be distributed to anybody circumstances. for use of the facility and g or upon receipt of a Tax Invoice for approved users. A NAR must be completed / set up for this option			
Organisation Name Contact Name Contact's Role Postal Address Phone Email For privacy purposes, the contact details provided above (excluding outside of Greater Hume Council (GHC) except in extenuating Payment Arrangements I/We the Hirer agree to pay \$ per understand payment is to be made at the time of booking Cash Cheque Credit Card Invoice	for use of the facility and g or upon receipt of a Tax Invoice for approved users. A NAR must be completed / set up for this option NAR Number:			
Organisation Name Contact Name Contact's Role Postal Address Phone Email For privacy purposes, the contact details provided above (excluding outside of Greater Hume Council (GHC) except in extenuating Payment Arrangements I/We the Hirer agree to pay \$ per understand payment is to be made at the time of booking Cash Cheque Credit Card Invoice	for use of the facility and g or upon receipt of a Tax Invoice for approved users. A NAR must be completed / set up for this option NAR Number:			
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Required Documentation					
Is the organisation currently incorporated under the Association Incorporation Act? Yes No. 16 Yes, please state number:					
Does the organisation currently have Public Liability Insurar					
You must provide a copy of your current "Certificate of Currency" with a minimum cover of \$20 million.					
Company:					
Policy Number:	Expiry Date: / /				
Does the organisation currently have a Liquor Licence?	☐ Yes ☐ No				
If Yes, please state type of licence:					
Does the organisation have an Australian Business Numbe	r (ABN)?				
If Yes, please state number:					
Undertaking and Acknowledgement					
Please Complete the Following					
Name	submit this application as the				
Role of the	Organisation				
am authorised to make this application and undertake to ensure that the Applicant (User) complies with its/his/her obligations under the <i>Use or Hire of Council Facilities - Terms and Conditions</i> .					
I/We all information provided in this application is true and correct and further acknowledge that the Council shall be entitled to recover such charges from the Applicant (User) in accordance with the conditions.					
I/We have read and understood the Use or Hire of Council Facilities - Terms and Conditions					
available online at http://www.greaterhume.nsw.gc3w9NecQ%3d&tabid=632 and agree to these term					
I have attached a copy of the organisation's Certifi					
I have attached a copy of the organisation's Liquo	r Licence (if applicable).				
Signature/s					
Data.					
Please complete this 3-page application form and return it along with the required documentation to:					
Greater Hume Council, PO Box 99, Holbrook NSW 2644 For Holbrook Library Complex Bookings Email: mail@greaterhume.nsw.gov.au For Holbrook Library Complex Bookings Email: holbrookctc@greaterhume.nsw.gov.au					
Office Use Only					
Uploaded to InfoXpert	Risk Officer to Complete this Section				
Assoc. Certificate of Currency Yes No Doc ID					
□ Booking Calendar <u>Calendar Name</u> □ Hire Fees \$ Per:	UA No. □ Approved □ Denied Notified				
□ Paid upon application Rec:	□ Risk Officer □ 355 Committee				
☐ Invoice Requested NAR No. Inform appropriate CS Officer if invoicing is required	☐ Confirmation of UA to Applicant Uploaded to InfoXpert ☐ Yes ☐ No Doc ID				
Officer Initials: Date:	Officer Initials: Date:				
Office:	Office.				

Forward to Risk Officer & events@greaterhume.nsw.gov.au for Information & Assessment