

Application for Hire of Council Venues

Prahran RSL – Casual Hire



HIRER INFORMATION

Hirer Name

ABN or ACN

Postal address

Suburb

Postcode

Type of hirer

- Individual Informal Community Group Not-for-Profit Organisation (evidence required) Owners Corporation (ABN or OC Certificate required) Commercial (ABN or ACN required)

Have you applied for a Council grant for use of this facility?

- Yes No

If you have received a Council grant, please provide grant number

May we give your details to the public if enquiries are received?

- Yes No

Primary contact

Given

Surname

Position

Telephone

Business

Mobile

Email

BOOKING DETAILS

Facility required

- Memorial Hall Commercial Kitchen
 Meeting Room

Date(s) required (if there is insufficient space, please attach a list)

Time(s) required

Start time (including set-up)

am pm

Finish time (including pack-up)

am pm

Description of activity

Number of guests/participants

REQUIREMENTS

Is food being distributed or consumed at the venue? Yes No

Is food being prepared onsite? Yes No

Is alcohol being distributed or consumed at the venue? Yes No

Will you be engaging a third party provider? Yes No

If so, please attach the third party's Public Liability Insurance Certificate of Currency

Third party provider name

Description of service provided/proposed activities

EQUIPMENT REQUIREMENTS

Please indicate quantities required

<input type="radio"/> Tables (round)	/5
<input type="radio"/> Tables (trestle)	/5
<input type="radio"/> Chairs	/150
<input type="radio"/> PA System (Memorial Hall only)	

Please list any other equipment you intend to bring on the day

1) _____ 2) _____

3) _____ 4) _____

5) _____ 6) _____

INSURANCE

It is a requirement of hire that public liability insurance is in place for the booking.

Commercial hirers, Incorporated Associations and non-commercial hirers with their own insurance are required to provide a copy of their Public Liability Insurance Certificate of Currency, current for the date of hire.

Non-commercial hirers without their own insurance may be eligible for cover under the City of Stonnington's Community Liability Pack and may indicate this requirement below.

- Non-commercial hirers only:** I wish to apply for insurance under the City of Stonnington's Community Liability Pack. I confirm that I have read the JLT brochure provided and understand my obligations and responsibilities in the event of a claim.

AGREEMENT

The conditions of hire included with this application apply to any booking made upon acceptance of this application. Please ensure you read carefully before signing.

I/We, _____ in my/our position as _____

confirm that I am/we are over the age of 18 years, am/are authorised to make this application and undertake to ensure that the hirer complies with its/his/her obligations under the Conditions of Hire.

I/We confirm the truth and accuracy of all details provided in this application and acknowledge that the area to which this application applies is restricted to the area nominated in this application.

I/We further acknowledge that the Council shall be entitled to recover such charges from the hirer in accordance with the conditions of hire.

I/We acknowledge receipt of the conditions of hire and agree to the terms and conditions stated therein.

I/We further undertake to be responsible for ensuring that all individuals or groups using the venue in association with this application shall comply with the conditions.

I/We agree to the terms stated above Yes

Signature _____

Date _____

PRIVACY AND DATA PROTECTION ACT 2014

The information provided as part of this form will be used by the City of Stonnington to assist in the provision, planning and development of venues and facilities for hire within the municipality. Information provided by you will only be used for the purpose for which it was collected. The information provided will not be disclosed to any outside organisation or third party. Individuals about whom 'personal information' is provided in the application may apply to the City of Stonnington's Privacy Officer on telephone 8290 1333 for access to or correction of information.

ATTACHMENTS

- | | |
|--|--|
| <input type="radio"/> Copy of Driver's Licence (if applicable) | <input type="radio"/> Evidence of Not-for-Profit status (if applicable) |
| <input type="radio"/> Owners Corporation Certificate (if applicable) | <input type="radio"/> Public Liability Insurance – Certificate of Currency |

Other _____

Please return your completed application form to City of Stonnington – Recreation Services Department

Email recreationsservices@stonnington.vic.gov.au

Mail P O Box 58
Malvern VIC 3144

In person Stonnington City Centre
311 Glenferrie Road, Malvern

For all enquiries, please contact the Recreation Services Department on 8290 1193