

UNANDERRA COMMUNITY CENTRE

(Unanderra Figtree Area Residents' Association Inc.)

Phone (02) 4271 2213/ Fax(02) 4271 1571

ABN: 70 648 320 608

Cnr Princes Highway & Factory Road (PO Box 294) Unanderra NSW 2526

APPLICATION FOR REGULAR HALL HIRES 2019 MAIN HALL OR SMALL HALL

Hirer's Name (or Group Name): _____

Address : _____ Postcode: _____

Telephone: Mobile: _____ Home: _____ Business: _____

I.D. (Drivers Licence No:) _____ Email: _____

Type of activity: (eg: Dancing, craft; music) _____

Requested date of commencement: _____

Frequency (please circle): Weekly Fortnightly Monthly Other _____

Day & Time: _____ day from _____ AM/PM until _____ AM/PM

_____ day from _____ AM/PM until _____ AM/PM

Regular periods of non-use: (school holidays, public holidays etc.):

Estimated number of people using the hall on average: _____

PLEASE NOTE: Your organization may be liable for any loss, damage or legal claims resulting from your use of this hall. Suitable Public Risk Insurance must be obtained.

The person signing this document will be held responsible in the event of any damages claim, and must be 21 years of age or older.

Name of Public Risk Insurance Company: _____

Office use only:

Date when Insurance Cover expires: _____

Insurance cover document sighted by: _____

Date sighted: _____.(Print UFARA official's name) _____

Note: both the front and back of this form must be completed

ALL HIRERS TO COMPLETE THIS SECTION:

AGREEMENT: I have **received, read and understood** the "Conditions of Use" applying to the hiring of the Unanderra Community Hall on behalf of _____ (Group Name) and I agree to abide by and to be bound by these conditions. **All hall hire fees must be paid in advance.**

Signature of Hirer: _____ Date: _____

Number of keys: _____ Key ID numbers: _____

I also acknowledge the receipt of the above key/s and agree to return them when no longer required to the Unanderra Community Centre, I also agree to email at the end of each month the attendance numbers to unanderracc@gmail.com or a completed form as provided.

Signature: _____ Date: _____

Date when key/s returned: _____

Office Use only:

Bond & key deposit \$ _____ Receipt No.: _____ Date: _____

Hiring fee per hour \$ _____ **payable monthly in advance**

POST- HIRE INSPECTION REPORT:

Conditions of premises: Clean OR some debris OR untidy/messy

Amount retained for cleaning and/or damages: \$ _____

Amount of bond refunded to hirer(s) _____ Cheque No: _____ Date: _____