

**WIRRAL****Leasowe Community Centre****Booking Form**Name of Hirer
Address of Hirer

Name of Group:

Post Code

Telephone No:

Hire Date(s)

Time(s) From:

To:

Room(s) required:

Purpose of Hire:

Equipment required:

Will you be selling alcohol? Yes / No Will you be serving alcohol? Yes / No
 If 'Yes' to selling alcohol please give name, address and telephone number of your licensee

(Proof of the above must be produced in advance to the booking secretary) (See Conditions of Hire Para 14)

Please give details of any insurance cover (see Conditions of Hire Para 5)

Please note that the Centre cannot insure you for function/event/activity, nor for your equipment.

Name of Insurer:

Policy Number

Type of Policy:

Expiry Date:

I hereby apply for the use of the facilities detailed above in accordance with the current Scale of Charges. I agree to comply with and be bound by the Conditions of Hire. I will see that the Conditions of Hire are properly observed and the appropriate charges are paid on demand. I declare that I am over 21 years of age.

Signed

Date

Please complete and return within 14 days. Do not send any money with this form - wait until your booking is confirmed.

DATA PROTECTION ACT 1998: The information you have provided is used to fulfill your booking. All records are treated in strict confidence, kept in a secure environment and only accessed by appropriate staff. We do not share this information with any other individuals or organizations.

FOR OFFICE USE ONLY

Category

FREE

CONCESSION

FULL RATE

Forms completed

CONDITIONS OF HIRE

STEWARDS FORM

Date entered in Diary

Date confirmed

Total Hire Charge

Balance Due

Date refunded deposit returned

Total number of people attending

Date deposit received

Cleaning Deposit

Additional Deposit

Date paid in full

One off hire

Regular booking

Show/event

Education

Councilor/MP/MEP

Council Dept
