

THORNLEIGH HILLCREST CONGREGATION
THE UNITING CHURCH IN AUSTRALIA

**CHURCH AND COMMUNITY COMPLEX
BOOKING FORM**

Thank you for your enquiry regarding the use of our facilities. Details of conditions and charges are set out in the accompanying brochure.

If you wish to proceed to hire you should do so as soon as possible, but certainly within seven (7) days.

We cannot confirm your booking until:

- hire fee (including GST) is received;
- bond is paid;
- insurance cover is paid or Certificate of Currency for your Public Liability Insurance is sighted;
- facility Hire Agreement Form is signed.

PLEASE COMPLETE

Name of organisation: _____

Contact person or organiser: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Date(s) of function or usage _____

Start and finish time(s): _____

Areas of facility required: (1) _____

(2) _____ (3) _____

Additional equipment required, eg. tables, screen, OHP, sound system:

(1) _____ (2) _____

(3) _____ (4) _____

Will you require underground parking? Yes No

Please briefly indicate the purpose of the hire of our facility: _____

Anticipated number attending _____

PLEASE NOTE

- **The cost of any damages or losses will be deducted from your bond.**
- **You must leave the facility in a clean and tidy state.**
- **You must only use the facility or areas indicated for your stated purpose.**

Your signature below indicates you understand and agree to Conditions of Hire of Facility.

Signature _____

Date _____

OFFICE USE ONLY	
Booking Allocation Number	
Confirmation of Insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No
Purchase of Insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No
Amount of Bond Paid	\$
Amount of Bond Refunded	\$
If Bond Refunded differs from Bond Paid, please indicate reasons for difference	
Conditions of Hire of Facility signed	<input type="checkbox"/> Yes <input type="checkbox"/> No
Additional Information/ Comments	
Access Co-ordinator Notified	<input type="checkbox"/> Yes <input type="checkbox"/> No
Times Confirmed	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please return this form and accompanying documentation to:

Booking Officer

15 Roach Ave
 Thornleigh 2120
 NSW