

VENUE HIRE APPLICATION FORM

CASUAL HIRE



CONTACT DETAILS

Contact Name: _____

Company (inc ABN): _____

Address: _____

Tel (h): _____ Mobile: _____

Email: _____

Member of SHSLSC: Yes No

Are you an incorporated body, sporting body, association
or profit making organisation? Yes No

If yes, no insurance under the Secret Harbour Surf Lifesaving Club or the City of Rockingham will be provided and you will need to submit a copy of your Public Liability Insurance with this application.

Are you a not-for-profit organisation? Yes No

If yes, please provide a copy of your Certificate of Incorporation.

BOOKING DETAILS:

VENUE HIRE (please tick)

Meeting Room Ground Floor Meeting Room 1st Floor Half Function Room

Full Function Room Sun Deck Wedding Package

Event Type: (Wedding, Gala Dinner, Conference, Birthday Party) _____

Date of Event: _____ Number of attendees: _____

Hire start time: allow time for setup _____ End time: allow time for pack up _____

Bar required (please tick) Yes Bar Opening time: _____

If appropriate please ensure you have completed an application form for associate membership to Secret Harbour Surf Life Saving Club and attached to your booking form.

Membership form attached

Do you wish to hire the services of SHSLSC staff to set up or pack down your event at an extra cost?

Set up staff required (please tick) Pack down staff required



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Security

Please note a security guard will be hired for any events after 7pm.
SHSLSC will coordinate and invoice the charges onto the venue hirer. (\$50 per hour, minimum 4 hours)

I have read the above and understand I will be invoiced for security from 7pm to the end time I have stated above.

Caterer Name: _____

Phone: _____ **Email:** _____

Commercial kitchen on ground floor required at cost of \$200 *food must otherwise be cooked offsite*
Please note your caterer must be licensed and must provide proof of licence and insurance prior to the event.

Name of Entertainment (DJ, Band, other) _____

Contact of Entertainment: _____

PAYMENT:

To secure the venue hire, please provide payment details for your bond below:

Credit Card: Name on Card: _____

Card Number: _____ Expiry: ____ / ____ CVV: _____

EFT: ACC NAME: Secret Harbour Surf Life Saving Club
BSB: 036 -060
ACC NO: 108739

Cheques payable to: Secret Harbour Surf Life Saving Club

Please provide account details to return bond: BSB: _____
ACC NO: _____

Please return this form with bond payment to:

Email: functions@secretharbourslsc.com

DISCLAIMER

I agree that I have read the Conditions of Hire and agree to abide by the Secret Harbour Surf Life Saving Clubs procedures and conditions of hire and be responsible for payment of all fees and charges associated with this hire.

Hirer name (over 21): _____

Signature: _____ Date: _____

