

APPLICATION FOR HIRE OF DR PETER CENTRE



Full Name:	
Full Address:	
Contact phone number:	
Alternative contact:	
Organisation:	
Date required:	
Nature of function:	
Start time:	Finish time:

N.B. Times must include preparation and clearing up time

Rooms required: Main Hall <input type="checkbox"/> £13 p.h. or part hour Jenny's room <input type="checkbox"/> £10 p.h or part hour Group room <input type="checkbox"/> £5 p.h or part hour Kitchen <input type="checkbox"/> £5 for 4 hours or part thereof <i>There is a minimum charge of two hours for individual bookings</i> Deposit £25 – refundable if the premises are, in the opinion of the management, left in good order.
Number of persons attending:
State any equipment which you wish to be available for your use:
Do you wish to use the outdoor area?
The serving of alcohol and the playing of live music is not permitted.
Is the event for charity <input type="checkbox"/> for a private event <input type="checkbox"/> for a commercial event <input type="checkbox"/>
Do you have any special requirements? If so, please detail them.

This hiring is on behalf of the organisation named above whose authority I have to bind them by signing this application form on their behalf. I hereby agree to observe and perform all the conditions of hire, a copy of which I have read and understood. I agree that payment of all fees and returnable deposit for this hire must be paid before the event and is a precondition for entry.

If paying by BACS, Bank account No: 00013077. Sort code: 40-52-40

Signature..... Date.....

Position in organisation.....

RETURN TO: Booking Secretary, 95 The Hundred, Romsey, SO51 8BZ

For administration use only

Hire approved by.....Date.....

Hire cost.....Deposit £.....