

Community Facility Regular Hire – Application Form

Please email the completed form to customer@rockingham.wa.gov.au. Alternatively you can post to Customer Service, City of Rockingham, PO Box 2142, ROCKINGHAM, WA 6967

Hirer / Group Information

Type of hire: _____

Name of hirer: _____

Organisation: _____

Address: _____

Contact No: Primary: _____ Secondary: _____

Email: _____

Public Liability : Yes* No Value: _____

Fee charged: Yes No Value: _____

No of participants: _____ ABN: _____

Hire category: Non-commercial** Commercial

**Please provide a copy of your public liability certificate of currency when you submit this form*

***You will be required to demonstrate your status as a non-commercial hirer*

Booking details

Venue:	Room (capacity):	Day and time:
Baldivis Recreation Centre	<input type="checkbox"/> Sports hall (300)	_____
	<input type="checkbox"/> Multipurpose room (30)	_____
Golden Bay Coastal Community Centre	<input type="checkbox"/> Main hall (245)	_____
	<input type="checkbox"/> Meeting room 1 (50)	_____
	<input type="checkbox"/> Meeting room 2 (25)	_____
	<input type="checkbox"/> Playgroup room (60)	_____
Hillman Hall	<input type="checkbox"/> Main hall (100)	_____
	<input type="checkbox"/> Meeting room (20)	_____
McLarty Hall	<input type="checkbox"/> Main hall (160)	_____
Port Kennedy Community Centre	<input type="checkbox"/> Main hall (200)	_____
	<input type="checkbox"/> Multipurpose room (40)	_____
	<input type="checkbox"/> Meeting room (12)	_____
Rockingham Arts Centre	<input type="checkbox"/> Exhibition space (22)	_____
	<input type="checkbox"/> Multipurpose room (50)	_____
	<input type="checkbox"/> Studio room (15)	_____

Secret Harbour Community Centre	<input type="checkbox"/> Main hall (245) _____ <input type="checkbox"/> Multipurpose room (58) _____ <input type="checkbox"/> Playgroup room 1 (50) _____ <input type="checkbox"/> Playgroup room 2 (50) _____ <input type="checkbox"/> Meeting room (4) _____	
Warnbro Community Recreation Centre	<input type="checkbox"/> Main hall (100) _____ <input type="checkbox"/> Multipurpose room (45) _____ <input type="checkbox"/> Playgroup room (30) _____	

Please circle dates in calendar if multiple days are required

July 2020							August 2020							September 2020						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
			1	2	3	4	30	31					1			1	2	3	4	5
5	6	7	8	9	10	11	2	3	4	5	6	7	8	6	7	8	9	10	11	12
12	13	14	15	16	17	18	9	10	11	12	13	14	15	13	14	15	16	17	18	19
19	20	21	22	23	24	25	16	17	18	19	20	21	22	20	21	22	23	24	25	26
26	27	28	29	30	31		23	24	25	26	27	28	29	27	28	29	30			

October 2020							November 2020							December 2020						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
				1	2	3	1	2	3	4	5	6	7			1	2	3	4	5
4	5	6	7	8	9	10	8	9	10	11	12	13	14	6	7	8	9	10	11	12
11	12	13	14	15	16	17	15	16	17	18	19	20	21	13	14	15	16	17	18	19
18	19	20	21	22	23	24	22	23	24	25	26	27	28	20	21	22	23	24	25	26
25	26	27	28	29	30	31	29	30						27	28	29	30	31		

January 2021							February 2021							March 2021						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
31					1	2		1	2	3	4	5	6		1	2	3	4	5	6
3	4	5	6	7	8	9	7	8	9	10	11	12	13	7	8	9	10	11	12	13
10	11	12	13	14	15	16	14	15	16	17	18	19	20	14	15	16	17	18	19	20
17	18	19	20	21	22	23	21	22	23	24	25	26	27	21	22	23	24	25	26	27
24	25	26	27	28	29	30	28							28	29	30	31			

April 2021							May 2021							June 2021						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
				1	2	3	30	31					1			1	2	3	4	5
4	5	6	7	8	9	10	2	3	4	5	6	7	8	6	7	8	9	10	11	12
11	12	13	14	15	16	17	9	10	11	12	13	14	15	13	14	15	16	17	18	19
18	19	20	21	22	23	24	16	17	18	19	20	21	22	20	21	22	23	24	26	26
25	26	27	28	29	30		23	24	25	26	27	28	29	27	28	29	30			

Additional information

(Storage requirements, one-off booking details, grassed area required etc.)

Booking details continued

Please provide a description of your activity: _____

Please provide details of any specialist equipment you intend to use: _____

Food and alcohol

Do you intend to sell food? Yes No
If yes, please provide details: _____

Do you intend to serve alcohol? Yes No
Do you intend to sell alcohol? Yes No
If yes, please provide details: _____

User group data

Age range of participants	<input type="checkbox"/>	0-15	<input type="checkbox"/>	16-25	<input type="checkbox"/>	26-35
	<input type="checkbox"/>	36-50	<input type="checkbox"/>	51-65	<input type="checkbox"/>	66+
How did you hear about us	<input type="checkbox"/>	Used before	<input type="checkbox"/>	Poster / ad	<input type="checkbox"/>	City website
	<input type="checkbox"/>	Social media	<input type="checkbox"/>	Other:	_____	

Written advice will be provided once your booking has been confirmed. Please note that submitting this application does not secure a booking.

Declaration

I agree that I have read and will abide by the City of Rockingham's terms and conditions of hire

Signature _____ Date _____