**REGISTER YOUR INTEREST TO Lease/hire the Jim Richards Pavillion**

# CONTACT INFORMATION

|  |  |
| --- | --- |
| NAME OF ORGANISATION/community member: |  |
| IS THE ORGANISATION INCORPORATED? | Y / N |
| IS THE ORGANISATION REGISTERED AS A NOT-FOR-PROFIT? | Y / N |
| POSTAL ADDRESS: |  |
| MAIN CONTACT PERSON: POSITION/ROLE:  CONTACT NUMBER:  EMAIL ADDRESS: |  |
| SECONDARY CONTACT PERSON & POSITION/ROLE:  CONTACT NUMBER:  EMAIL ADDRESS: |  |
| How will having use of the venue benefit your members and the wider community? |  |

# PROPERTY INFORMATION

|  |  |
| --- | --- |
| proposed day/times that your organisation would use the facility: |  |
| types of activities conducted from the facility: |  |
| total no. of members in your community/ organisation: |  |
|  |  |
| State estimated numbers of members for each group: | Children 0 - 4 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Children 5 - 13 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Youth 14 - 19 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Adults 20-40 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Adults 40-65 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  seniors 65+ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| does your organisation have public liability insurance? | Y / N |
| does your organisation have volunteer accident insurance? | Y / N |
| would you require a liquor licence at the facility? | Y / N |
| would you be preparing AND/or cooking food at the facility? | Y / N |
| ARE YOU AWARE FEES WILL APPLY FOR THE LEASE/HIRE OF THE VENUE?  (HOURLY/DAILY/WEEKLY OR YEARLY FEES WILL BE APPLIED) | Y / N |
| ARE YOU WILLING TO SHARE the FACILITY WITH other COMMUNITY ORGANISATIONs/community members? | Y / N |

# ATTACHMENTS

PLEASE ATTACH THE FOLLOWING DOCUMENTS:

* Certificate of Incorporation
* CONSTITUTION/RULES OF ASSOCIATION
* PUBLIC LIABILITY INSURANCE AND/OR VOLUNTEER ACCIDENT INSURANCE