

Peatmoor Community Facilities
 Peatmoor Community Primary School
 Pepperbox Hill
 Peatmoor
 Swindon
 SN5 5DP



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 Registered Charity No: 1111747

APPLICATION FOR FACILITY HIRE – ONE OFF EVENT – CHILDREN PRESENT

Please complete this form and send/fax to the above address.

Name of Club/Group:	
Name of applicant:	Position:
Address:	
Post Code:	
Daytime Contact Tel No:	Email:

FACILITIES REQUIRED

Day:		Date:			
Facility Area	Activity	Open to Public		When I Need Access	When I will be cleared up and ready to leave the building
		From	To		

Event: Maximum Numbers Attending <input type="text"/> Average age of children U18 Attending <input type="text"/>	Equipment Required: Tables No: <input type="text"/> Chairs No: <input type="text"/>
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If you are bringing in/hiring equipment for your booking please detail below:

Name & Address of Company	What is being hired	Have you included set-up/down time in the above times (tick to confirm)	Please include copy of their Public Liability Insurance (tick to confirm attached)
	Disco	<input type="checkbox"/> YES/NO	<input type="checkbox"/> attached
	Other (please list)	<input type="checkbox"/> YES/NO	<input type="checkbox"/> attached

Please complete Sections 1 – 4

Section 1: Safeguarding

Will all children under 18 years old (U18) who attend be accompanied by their parent/guardian/responsible adult at all times. (please tick the box that applies)	<table border="1"> <tr> <td align="center">YES</td> </tr> <tr> <td>Please ensure a list of children present on the day is available at the event.</td> </tr> </table>	YES	Please ensure a list of children present on the day is available at the event.	<table border="1"> <tr> <td align="center">NO</td> </tr> <tr> <td>Please ensure a list of children and their contact details is available at the event.</td> </tr> </table>	NO	Please ensure a list of children and their contact details is available at the event.
YES						
Please ensure a list of children present on the day is available at the event.						
NO						
Please ensure a list of children and their contact details is available at the event.						
I confirm that all unaccompanied children will be released back into the care of an appropriate adult.	Signed by Activity Organiser: _____ Date: _____					

Section 2: Insurance *Please tick (a) or (b) as appropriate*

- a) I confirm that I/My organisation has appropriate insurance including £5 million public liability of which a copy is enclosed.
- b) I/My organisation does not have the required Public Liability Insurance please invoice at a cost of 10% of the hiring fee. (Please note for certain activities we are unable to arrange Public Liability Cover. Examples of such activities are political meetings, large public events or events that have a number of contributors).

Section 3: Payment *please complete payment box*

I have enclosed payment in full for this booking. If you require a receipt please tick box. Payment can be either cheque (payable to Peatmoor Community Facilities) or cash can be brought into the school office.

Section 4: Agreement *Please tick to confirm each box to confirm agreement*

- a) I agree to keep a register of those present on the day (see Section 1) and am aware that I may be asked to show this to the Site Manager to ensure Safeguarding plus Health and Safety requirements are met.
- b) I agree to ensure that all those in attendance are informed that they may only access the designated room(s)/area(s) and MUST NOT attempt to access other areas.
- c) I confirm that all information provided by myself, in this form is accurate.
- d) I have attached all the relevant paperwork and payment in full for the booking.
- e) I have read and understand the terms and conditions within the Lettings
- f) Agreement and agree to adhere to them. I will at all times follow this advice and comply with and be bound by the conditions of hiring in the Lettings Agreement and Booking form. A failure of the hirer to observe these conditions would result in a withdrawal of the use of the facilities. I declare that I am over 18 years of age.

Signature:

Name in Print:

Date:

To be completed by the School if unaccompanied children are to be present:

If an adult who is responsible for the letting becomes concerned about the welfare of a child who is attending, they should contact the NSPCC on 0808 800 5000

Form checked by (Name and signature of Headteacher or Designated Member of Staff)

Name: _____ Job Title: _____

Signed: _____ Date: _____