



CPA FACILITIES HIRE APPLICATION FORM

Name of Organisation _____
 Hirer's Contact Name _____
 Address _____
 Telephone Number _____ Mobile _____
 Fax _____
 E-mail _____
 Type of Performance/Activity _____
 Requested Date _____
 Call times required _____

Request Hire of the Facility single use regular use

Number of Guests/Participants _____

Hours of Use _____
(Please include set up and clean up time)
(Availability Tuesday/Wednesday/Thursday evenings 6pm to 10pm only)

Wheelchair patrons YES NO

Expected number of cars _____

STAFF REQUIRED FOR VENUES

Wait staff	YES (Numbers _____)	NO
Security	YES (Numbers _____)	NO
Cleaning Staff	YES (Numbers _____)	NO
Parking Attendants	YES (Numbers _____)	NO

Are you intending to employ external assistance eg: Caterers, Sound, and Lighting? YES NO
If yes, please give details.

Name of Company _____
 Position of employment (Role) _____
 Contact phone number _____

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EQUIPMENT

Will you be requiring the use of any of the following?

Tables	YES	NO	how many? _____
Chairs	YES	NO	how many? _____
Trestle tables	YES	NO	how many? _____
Urns	YES	NO	how many? _____
Wi-Fi	YES	NO	
Lectern	YES	NO	
With microphone	YES	NO	
White board	YES	NO	(Please bring own markers and eraser for whiteboard)
PowerPoint presentation	YES	NO	(Laptop computer IS NOT provided)
Fold-back speakers powered	YES	NO	
Microphones	YES	NO	how many? _____

For what purpose (ie speaking, singing, band) _____
What type (ie hand held, lapels, on stands) _____

Please provide an outline of items you will be providing (please give details

All Saints' College Promotion of your event.

At the discretion of the Community Relations Department, your event may be promoted through the College website and weekly e-newsletter.

Would you like your event promoted by the college YES NO?

**if yes please attach proposed promotional material*

I/we, have read the conditions of hire and accept and agree to them.

Print name

Print name

Print name

Signature

Signature

Signature

On behalf of _____ (Organisation)

Date _____