



YORK VENUES BOOKING FORM

File No: _____

Record No: _____

To be completed and returned to the Shire Offices with Payment

Please TICK applicable venue, one form per venue.**York Town Hall**

- Entire Town Hall
Or select from below
 Lesser Hall and Kitchen
 Kitchen

Parks & Reserves

- Avon Park
 Peace Park
 Candice Bateman Park
 Mount Brown
 Monger's Reserve

Please refer to the schedule of fees and charges [online](#).**HIRER'S DETAILS**

Organisation:			
Contact Name:			
Postal Address:			
Phone:		Email Address:	
Preferred Contact Method:	<input type="checkbox"/> Telephone	<input type="checkbox"/> Email	<input type="checkbox"/> Post

EVENT DETAILS

Event name:			
Event Date and Times: (Please include setup and clean up dates and times)			
DATE FROM:	DATE TO:	TIME FROM:	TIME TO:

Depending on the type of event, an Event Application & Approval may be required:

Is your event open to the public, or is it a private event?	<input type="checkbox"/> Public <input type="checkbox"/> Private
If a public event, has an event application been issued?	<input type="checkbox"/> Yes <input type="checkbox"/> No

- Is alcohol to be consumed? Yes No
If yes, completed *Permit to Consume Alcohol on Shire of York Property* attached? Yes No
Do you require a site visit prior to your event? Yes No
Are you a Community Group or Not for Profit Organisation? Yes No
If yes, proof of Community Group or Not for Profit Status attached? Yes No, on file

Public Liability Insurance (\$10 million minimum)

Have you provided a copy of your Public Liability Insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No, on file
Do you require additional bins during the event?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you require additional cleaning during the event?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please refer to the our website for more information on [Events in York](#).

Last Updated 8/11/2022

HIRER'S DECLARATION

I have read and understood the Conditions of Hire for the Venue. I understand that should the Property and associated facilities not be left in a condition satisfactory to the Shire of York, I will forfeit all or part of my bond to cover cleaning or repairs required.

I understand that it is my responsibility to ensure that I remain informed of the current Federal and State Government directives regarding COVID-19.

Signed: _____

Date: _____

OFFICE USE ONLY

CUSTOMER ACTIONS

Client provided Conditions of Hire:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Booking Number:			
Bond Paid:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Standing
Bond Receipt Number:			
Hire Fee Paid:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Exempt
Hire Fee Receipt Number:			
Application for Fee Waiver:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Hirer notified of current COVID Requirements:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

SOUND SYSTEM

Use of Sound System requested:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sound System Induction Undertaken:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

COMMUNICATIONS

Copy emailed to appropriate Officer(s):	<input type="checkbox"/> Parks & Gardens (Depot) <input type="checkbox"/> Events & Economic Development Officer <input type="checkbox"/> Visitors Centre <input type="checkbox"/> YRCC <input type="checkbox"/> Health Officer <input type="checkbox"/> Technical Services Officer
Creditor form completed:	<input type="checkbox"/> Yes <input type="checkbox"/> Existing Creditor

ALCOHOL CONSUMPTION

Application to consume alcohol form supplied:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Alcohol Consumption Fee Receipt Number:	
Copy emailed to police:	<input type="checkbox"/> Yes <input type="checkbox"/> No