 **Block Booking Form**

**Please use block capitals when completing this form**

|  |  |
| --- | --- |
| **Name of User Group:** |  |
| **Hirer’s Name:** |  |
| **Hirer’s Address:** |  |
|  |
| **Postcode:** |  |
| **Contact Number:** |  |
| **E-Mail Address:** |  |
| **Is your group Voluntary Based or Income Generated? (Please Circle)** | Voluntary / Income Generated |
| What is the age range of people attending your Group? |  |
| Does your group require any other helper to be CRB checked?(if so, please provide on a separate sheet all CRB numbers and expiry dates for each person) | YES/NO |
| **Space Required? (Please Tick)** |
| **HALL** | **SADDLERY** | **ROOM 3** | **ROOM 4** |
| **Date of commencement of hire: (DD/MM/YY)****Cancellation period – one month in writing** |
| **Days of the week Required** (please circle) |
| **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** | **Sunday** |
| **Start Time:** |  | **Finish Time:** |  |
| **Term Time Only? (Please Circle)** | YES / NO |
| **Other Exclusion Dates (inc holidays etc.)** |  |

**Hirer’s Liability Insurance – This provides the hirer with cover against accidental damage to third party property and compensation for accidental injury to third parties up to a limit of £2000.00. Cover also includes liability for accidental damage to the hired property up to a limit of £1000.00**

**Declaration:**

This contract signifies an agreement by the hirer to the Terms and Conditions relating to the use of Horwich Community Centre, a copy of which you will be given at time of booking.

Do you have insurance? Y / N A copy is required at the time of booking

**Please confirm that you have carefully read and understood and that you fully accept the Terms and Conditions relating to the booking and use of Horwich Community Centre**

Signed………………………………………….. Print Name…………………………………….. Date………………………………….

**Any Additional Requirements:**

**Hot or Cold Projector Whiteboard Stationary**

**Water**

**Cups Screen CD player**

Room Set-up