

Admin Only	Date	Initial
Entered		
Confirmation Sent		

## SPORTING AND RECREATIONAL FACILITY BOOKING FORM

YES / NO

**ATTENTION:** Infrastructure and Engineering Services

Email: mail@narromine.nsw.gov.au Fax: 6889 9998

CURRENT COPY OF CERTIFICATE ON FILE WITH COUNCIL:

A <u>CURRENT</u> Public Liability Certificate of Currency in the amount of \$20,000,000.00 minimum.		
required before con	firmation will be given. Council require 7 days to process booking	
REQUESTBY: School or Organisation)		
CONTACTNAME:		
CONTACT No:	FAX No:	
EMAIL:		
ACILITY NAME:		
WILL LIGHTS BE USED? □		
(\$28 / HR FOR 1/2 BANK	OF LIGHTS AND \$56 / HR FOR FULL BANK OF LIGHTS)	
Booking Date:	Start   Finish   Time:	
f vou require multiple dates or	sites, please attach details to this form	
Type require mempio dates of	sites, please affacti actails to this tofff	
BILLING DETAILS (this sec	ction must be complete unless you are a junior only sporting club)	
Organisation:		
PostalAddress:		
Contact Number:		
Email:		
PURPOSE/ACTIVITY:		
NOMINATED PERSON I	N CHARGE DURING EVENT (must be contactable throughout booking/event)	
Name:	Contact Number:	
SPECIAL REQUIREMENTS	S (if any):	
	ENCY PURIC HARILITY ATTACHED: YES / NO	