

QEII SENIORS AND COMMUNITY CENTRE VENUE USE APPLICATION

PART 1: ORGANISATION AND CONTACT DETAILS

Organisation/Individual to be invoiced: _____

Is your organisation a registered Non-Profit? Yes No

ABN: _____ ANCN: _____

Address: _____

Telephone No: _____ *Organisation Contact Number*

Contact Person: _____

Position: _____

Address: _____

Email Address: _____

Mobile Number: _____ *Contact Person Contact Number*

PART 2: BOND REFUND *Account Name must match organisation/individual listed above*

Account Name: _____

BSB: _____ Account Number: _____

PART 3: FUNCTION DETAILS

Type of Function: _____

Proposed Date(s) of Function: _____

Proposed Date(s) for Set-up/Pack-down: _____

One-off Function: Yes No *If NO, frequency of Function: _____*

Ticketed Function: Yes No *Cost of Ticket: _____*

Number of Guests: _____

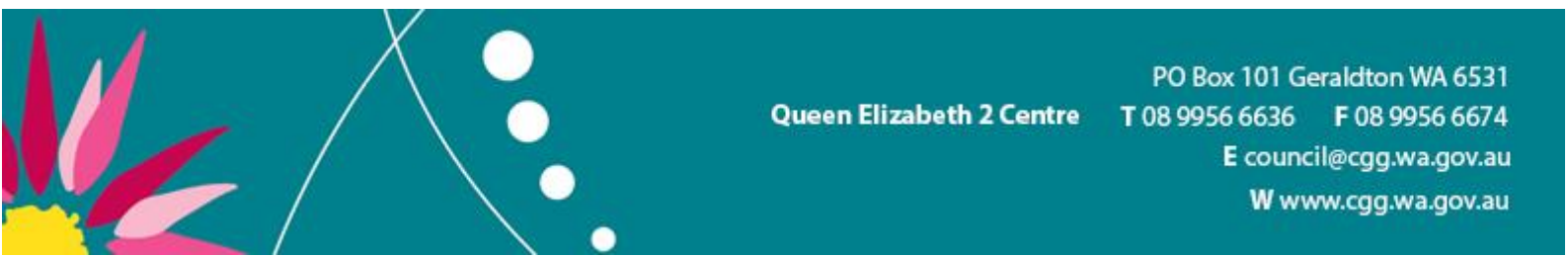
PART 4: FUNCTION PROGRAM

FUNCTION SET-UP

Date: _____

Start Time: _____ am/pm

Finish Time: _____ am/pm



PART 4: FUNCTION PROGRAM *continued...*

FUNCTION

Date: _____

Start Time: _____ am/pm

Finish Time: _____ am/pm

FUNCTION PACK-DOWN

Date: _____

Start Time: _____ am/pm




Finish Time: _____ am/pm

Please Note: The room set-up and pack-down is the responsibility of the hirer.

PART 5: ROOM HIRE

- Upper Hall Lower Hall Meeting Room Activity Room
 Commercial Kitchen – Lower Hall Commercial Kitchen – Upper Hall
Kitchen Only *Kitchen Only*

Capacity

STYLE	CABARET	BOARDROOM	THEATRE
Seating Set-Up			
Activity Room	16	18	20
Freeman Room	30	40	60
Lower Hall	200	200	250
Upper Hall	300	300	425

Floor Plans

Please refer to the [floor plans](#), which will assist you in the site plan or layout of your function.

PART 6: EQUIPMENT REQUIRED

- Stage Tables Chairs Crockery
 Cutlery Glassware Sound Equipment Microphone
 Lectern Whiteboard Kitchen Projector/Screen
 Additional other adjacent external areas

PART 7: FOOD AND BEVERAGE

- Will Alcohol be consumed? Yes No
 Will Alcohol be sold? Yes No
 Will Food be sold? Yes No

It is the responsibility of the Function Organiser to ensure all appropriate permits and licences have been applied for, and submitted to the City of Greater Geraldton within the required timeframes. Please refer to [E11 – Consent to consume Alcohol on Council Property](#).

PART 8: COVID MANDATES

It is the responsibility of the Function Organiser to ensure that all current WA State COVID Rules will be followed. For more information, please visit [COVID-19 coronavirus](#).

PART 9: HIRE INSTRUCTIONS

The Authorised Responsible Person (ARP) is the person authorised by the hirer to legally represent the hirer and ensure all legal obligations of the hire terms and conditions are met. The Safety Warden is the person authorised by the hirer to perform all safety obligations of the hire terms and conditions. For small functions ARP and SW can be the same person, but for large attendance numbers it is strongly recommended that a separate SW be authorised by the hirer for public safety.

	ARP	Safety Warden
Name		
Address		
Contact Number		
Email Address		

The Hirer and/or persons as authorised:

- Acknowledges and accepts the terms and conditions of hire for/on behalf of the above-mentioned hirer.
- Will sign for and return keys and will be responsible for ensuring that the building is left in the condition in which it was occupied by the hirer.
- Will ensure all building and safety inductions are completed by arrangement prior to the function date.
- Is insured Public Liability as per the terms and conditions.

I have read and agree to the Terms and Conditions outlined in [QE202 – QEII Seniors and Community Centre Conditions of Hire](#).

Signature: _____

Date: _____

Please submit completed applications to council@cgg.wa.gov.au.

OFFICE USE

• Bond Required for Hire of the QEII Centre	\$ _____
• Hire Fee: Account Number 08400603	\$ _____
• Additional Items:	\$ _____
TOTAL PAYMENT <i>included GST</i>	\$ _____

Officers Signature: _____

Date: _____