

**Jamieson Way  
Community Centre Inc**  
59 Jamieson Way Point Cook 3030  
☎ 9395 3777 📠 9395 7791  
✉ [admin@jamiesonwaycc.org.au](mailto:admin@jamiesonwaycc.org.au)  
🌐 [www.jamiesonwaycc.org.au](http://www.jamiesonwaycc.org.au)  
**Reg. No:** A00478865  
**ABN:** 27450836232

<b>OFFICE USE ONLY</b>	
<input type="checkbox"/> Application Approved	<input type="checkbox"/> Booking Entered
<input type="checkbox"/> Conditions of Hire issued	
<input type="checkbox"/> Insurance – <input type="checkbox"/> WCC <b>OR</b> <input type="checkbox"/> Own policy attached	
<input type="checkbox"/> Instructed to register Party Safe Plan	
<input type="checkbox"/> Instructions & guidelines of centre issued	
<input type="checkbox"/> <b>Key Code:</b> _____	<b>Date Key Returned:</b> _____
<input type="checkbox"/> <b>Alarm Code:</b> _____	<input type="checkbox"/> <b>Code deleted</b>
<b>BONDS REFUND:</b>	Refund Approved: YES / NO
Cheque No: _____	Date Sent: _____

## Application & Agreement to Hire – CASUAL HIRE -2011

Please read the “Conditions of Hire” before completing this form.

**Contact Person:** \_\_\_\_\_

**Name of Organisation:** \_\_\_\_\_

**Postal Address:** \_\_\_\_\_

\_\_\_\_\_ **P/Code** \_\_\_\_\_

**ABN:** \_\_\_\_\_

**Telephone: Bus:** \_\_\_\_\_ **AH:** \_\_\_\_\_ **Mob:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Room/s Requested:**  Hall  Kitchen Only  Community Room 1 or 2 or combined

**Purpose of Hire:** \_\_\_\_\_

**Date/s required:** \_\_\_\_\_

**Arrival Time:** \_\_\_\_\_ **Departure Time:** \_\_\_\_\_  
Include ALL set up/pack up time

**Numbers Attending:** \_\_\_\_\_  Children  Youth  Adults  Seniors  Disabled

OFFICE USE ONLY	Hours	Rate	TOTAL	Date Paid	Payment Type
Set Up Hours		<b>\$25.00 per hour</b>			Cash / Chq / DC
Function Hours		<b>\$ per hour</b>			Cash / Chq / DC
Room Bond		<b>\$</b>			Cash / Chq / DC
Key Bond		<b>\$50.00</b>			Cash / Chq / DC
PL Insurance		<b>\$21.00</b>			Cash / Chq / DC
<b>Invoice Number</b>		<b>TOTAL DUE</b>			
		<b>Payments Received</b>			
		<b>Balance Due</b>			Cash / Chq / DC

**Extra Requirements Available on Request – Subject to Availability**

- |                                 |                                    |                                      |   |
|---------------------------------|------------------------------------|--------------------------------------|---|
| <input type="checkbox"/> Tables | Quantity _____                     | <input type="checkbox"/> Kitchen     | <input type="checkbox"/> TV   |
| <input type="checkbox"/> Chairs | Quantity _____                     | <input type="checkbox"/> Kitchenette | <input type="checkbox"/> DVD / Video                                  |
| <input type="checkbox"/> Laptop | <input type="checkbox"/> Projector | <input type="checkbox"/> Screen      | <input type="checkbox"/> PA System <input type="checkbox"/> CD Player |

**Insurance Details**

I / We understand that it is my/our responsibility to arrange for Public Liability Insurance cover for activities occurring at and from the community facility.

**Attach a copy of your Public Liability Insurance “Certificate of Currency” to this application.**

**Alternatively, the Wyndham City Council**

**“Public Liability Insurance Scheme for Casual Hirers”  
is available from the centre at cost of \$21.00 per function (conditions apply)**

**Policy No:    60A085017PLB                      Company:    QBE Insurance (Aust) Limited**

**Period of Cover: FROM \_\_\_\_\_ TO \_\_\_\_\_**

**INSURANCE RELEASE AND INDEMNITY CLAUSE**

I/We do hereby agree to release the Wyndham City Council and the Jamieson Way Community Centre Board of Management from any liability whatsoever for any bodily injury, loss or damage which may be sustained or incurred as a direct result of the hiring by me/us or the group/organisation which I/we represent or purport to represent, at the community facility named herein.

I / We do further agree to fully indemnify the Wyndham City Council and the Jamieson Way Community Centre Board of Management for any loss or damage to its property which may be sustained or incurred as a result of this hiring and I/We authorise Jamieson Way Community Centre Board of Management to use all or part of the bond already paid to pay for any damage or any work requiring to be carried out to the Centre as a result of the hire and I/we further agree to pay all and any amounts which exceed the amount of the bond lodged.

**AGREEMENT TO HIRE - ACCEPTANCE STATEMENT**

I / We \_\_\_\_\_  
*(Name in Full)*

Being the nominee for group/organisation (if applicable) \_\_\_\_\_

Have read and understood the:

- **Insurance Release and Indemnity Clause**
- **Conditions Of Hire including the Security Clause**

And agree to abide by the rules and conditions and pay all fees in full and have a clear understanding of the responsibilities of using the facility as set out in this Agreement and the Conditions of Hire. By signing below you agree to enter, use and leave the building only during the times specified in the application to hire.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_