**Martock Parish Council**

**BOOKING FORM**

I/We wish to hire (please tick where appropriate)

|  |  |
| --- | --- |
| Parish Hall |  |
| Parish Hall (Charity Events) |  |
| Meeting Room (rear of Parish Hall) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Day | Date | \*From am/pm | \*To am/pm |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

\*Please ensure you give correct times above so that the caretaker will arrive in good time to open up the premises.

|  |  |
| --- | --- |
| For the purpose of |  |

Will alcohol be consumed? YES/NO. Please provide the name and address of person responsible for the provision of alcohol and who has made an application to Somerset Council for a temporary event licence.

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Post Code |  |
| Contact Number |  |
| Email |  |

I/We have read and accept the booking, payment and cancellation terms and conditions.

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Post Code |  |
| Contact Number |  |
| Email |  |

|  |  |
| --- | --- |
| Name of Organisation (if applicable) |  |
| Name of Hirer |  |
| Signature |  |
| Date  |  |

Office Use Only

|  |  |  |  |
| --- | --- | --- | --- |
| Damage deposit received | Yes/No | Amount Charged | £ |
| If some or all of the damage deposit is retained, state sum retained and reason for retention |  |
| A copy of the Hirer’s Public Liability insurance received |  |
| A copy of the Hirer’s Temporary Alcohol License has been received  |  |
| A copy of the Hirer’s Risk Assessment has been received |  |

 I confirm that the above information have been provided

|  |  |
| --- | --- |
| Name |  |
| Signature |  |
| Date  |  |