



GATEACRE TEAM

Booking Form

This Agreement is between:

1. The Parochial Church Council of Gateacre Team Ministry (PCC)
2. The person(s) or organisation named below (Hirer)

Hirer Details:

- Name of Hirer (Individual/Organisation): _____
- Contact Name (if different): _____
- Address: _____
- Phone Number: _____
- Email Address: _____

Event Details:

- Purpose of Hire: _____
- Date(s) of Hire: _____
- Start Time (including setup): _____ End Time (including cleanup): _____
- Expected Number of Attendees: _____

Premises Details:

- Room(s) Required: _____
- Additional Facilities (e.g. toilets, x number of tables and chairs): _____

Fees & Payment:

- Hire Fee: £ _____
- Deposit (if applicable): _____
- Payment Due Date: _____

Insurance & Safeguarding:

- Do you or your chosen third parties have public liability insurance? (Y/N) _____ If yes, please provide a copy.
- Do you have a safeguarding policy? (Y/N) _____ If no, you agree to adhere to the PCC's Safeguarding Policy? (Y/N) _____

The parish Safeguarding Officer is Mr Scott Pughsley (scott_pughsley@hotmail.com)

Additional Information or Special Requests:

Agreement & Declaration:

I, the undersigned, confirm that I have read and agree to abide by the terms and conditions set out in the Agreement, Standard Conditions of Hire, and any Special Conditions of Hire. I understand that failure to comply may result in cancellation of my booking without refund.

Signature of Hirer: _____ Date: _____

Signature of PCC Representative: _____ Date: _____