



### Rental Application Form

Name of Group/Person: \_\_\_\_\_

Person Responsible: \_\_\_\_\_

Address: \_\_\_\_\_

Phone/Contact: \_\_\_\_\_

Type of Activity: \_\_\_\_\_

Equipment/Requirements? \_\_\_\_\_

Approx. No. in Group: \_\_\_\_\_ Hourly Rate \$ \_\_\_\_\_

Rental Classification: Community Group  Private  Business

Term	Day & Date	Time	Invoice No.	Room
Term 1 <i>Jan - Mar</i>				
Term 2 <i>Apr - Jun</i>				
Term 3 <i>Jul - Sep</i>				
Term 4 <i>Oct - Dec</i>				

Own Insurance: Yes  No

Keys - Key Deposit \$50.00 *Please note - no extra keys may be cut. Keys must be returned to the Family Centre on the due date stated.*

Front Door	
Window	
Meeting Room	
Storeroom	
Shed	
Gate Key	
Other	
CODE	

Bond Total \$ \_\_\_\_\_

Key Bond \$ \_\_\_\_\_

Hire Cost \$ \_\_\_\_\_

Equipment Hire \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Receipt No. \_\_\_\_\_

Refund Receipt No. \_\_\_\_\_

Date Returned \_\_\_\_\_

I have read the Rules and Conditions of Hire of the Armadale Community Family Centre and agree to abide by them.

Please note as per the above mentioned Rules and Conditions alcohol must not be consumed on the premises without written approval from the Management Committee.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_