



St William's School
GROVELY
In God's Hand

ST WILLIAM'S SCHOOL

FACILITIES HIRE

EXPRESSION OF INTEREST

| | | |
|---|---|--|
| Name of Organisation | | |
| Contact Person /Hirer | | |
| Phone number | | |
| Email | | |
| Home Address | | |
| Purpose of the Booking | | |
| Dates and/or Days required | <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday |
| Times | Start : | Finish: |
| From | | |
| To | | |
| Facilities required(Please tick) | | |
| SMCMC Auditorium | | |
| SMCMC Kitchen | | |
| Library/Cybrary | | |
| Tennis Courts | | |
| Undercover Area | | |
| Oval | | |
| Other | | |
| Insurance Details: Please include a copy of Certificate of Currency with your application form. | | |
| Working with Children Check: Please include number, expiry date and copy/copies of Blue Card/s. | | |
| Special Conditions (e.g. liquor licence) | | |

SIGNED _____ DATE _____
(Hirer)

SIGNED _____ DATE _____
(Principal)