

Application for Hall Booking - Thames War Memorial Civic Centre - Whole Facility



Contact details

Must be completed by the client who is paying the account

Full name of Hirer	
Company name	
Phone number	Postal address
Fax number	
Email address	

Details of person responsible for care of the facility during occupation (if different from above)

Contact name	
Phone number	Mobile number
Name of sound provider (DJ/Band/MC etc)	Phone number

Purpose and details of activity

What is the purpose for the hire of Thames War Memorial Civic Centre - Whole Facility?

Activity full details

Dates required? (incl set up and pack up)	Specify dates and times e.g. Saturday 18th May, 8.00am - 4.00pm to Sunday 19th May, 9.00am - 4.00pm	_____	to	_____
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Numbers attending?	Numbers attending: _____	Private <input type="checkbox"/>	Commercial <input type="checkbox"/>	Community <input type="checkbox"/>
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Will an entry fee be charged? YES NO

If an alcohol licence is required is it	Applied for <input type="checkbox"/>	Granted <input type="checkbox"/>
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Bank account verification for bond return.

Please attach a bank deposit slip 

or
Fill out bank account number and sign below

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Signature _____

Date (DD/MM/YYYY) _____

Seating requirements

Do you require table and seating set up?

If yes please tick required and specify quantities.

YES NO

Charges apply.

Please setup the following	<input type="checkbox"/> SINGLE CHAIRS # _____	<input type="checkbox"/> TRESTLE TABLES # _____	<input type="checkbox"/> PORTABLE STAGING # _____	<input type="checkbox"/> TIERED SEATING (BLEACHERS) # _____
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Café service

Do you require a café service?

Charges apply.

YES NO

Please setup the following	<input type="checkbox"/> TEA/COFFEE/SUGAR/MILK TO BE PROVIDED # _____	<input type="checkbox"/> WATER JUGS AND GLASSES TO BE PROVIDED # _____
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We have outside caterers. Please supply details

Outside caterers details

Available equipment

Conference Room equipment. Please tick if you require any of the following (Free of charge)

<input type="checkbox"/> SCREEN	<input type="checkbox"/> DATA-PROJECTOR	<input type="checkbox"/> EXT. CORD	<input type="checkbox"/> CEILING SPEAKERS	<input type="checkbox"/> WHITEBOARD	<input type="checkbox"/> LECTERN	<input type="checkbox"/> POWER BOARD
<input type="checkbox"/> PIANO (charges apply)	<input type="checkbox"/> WIFI (available throughout the Civic Centre)					

Portable sound equipment. Please tick if you require any of the following (Free of charge)

<input type="checkbox"/> CORDLESS MICROPHONE	<input type="checkbox"/> MICROPHONE	<input type="checkbox"/> SPEAKERS
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Auditorium – Lighting & Sound Equipment. Please tick if you require any of the following (Charges apply - equipment not owned by Council)

<input type="checkbox"/> FOH LIGHTS	<input type="checkbox"/> STAGE WASH	<input type="checkbox"/> SIDE CURTAINS	<input type="checkbox"/> 3-PHASE POWER	<input type="checkbox"/> FOLLOW-SPOT	<input type="checkbox"/> MIXING DESK	<input type="checkbox"/> MOUNTED SPEAKERS
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Foyer. Please tick if you require the following (Free of charge)

<input type="checkbox"/> WALL-MOUNTED FLAT-SCREEN MONITOR (USB port and internet capable)

Health and Safety

For functions up to 300 people two wardens are to be designated for your function, to be responsible for the evacuation of people from the Hall in case of an emergency. Please state the names of these people:

Building Warden	Floor Warden
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In addition to these wardens, if your function is over 300 people a Certified Safety Officer is also required:

Certified Safety Officer

Information

For more information, please contact our:

Customer Services Team

Phone: 07 868 0200

Fax: 07 868 0234

Email: customer.services@tcdc.govt.nz

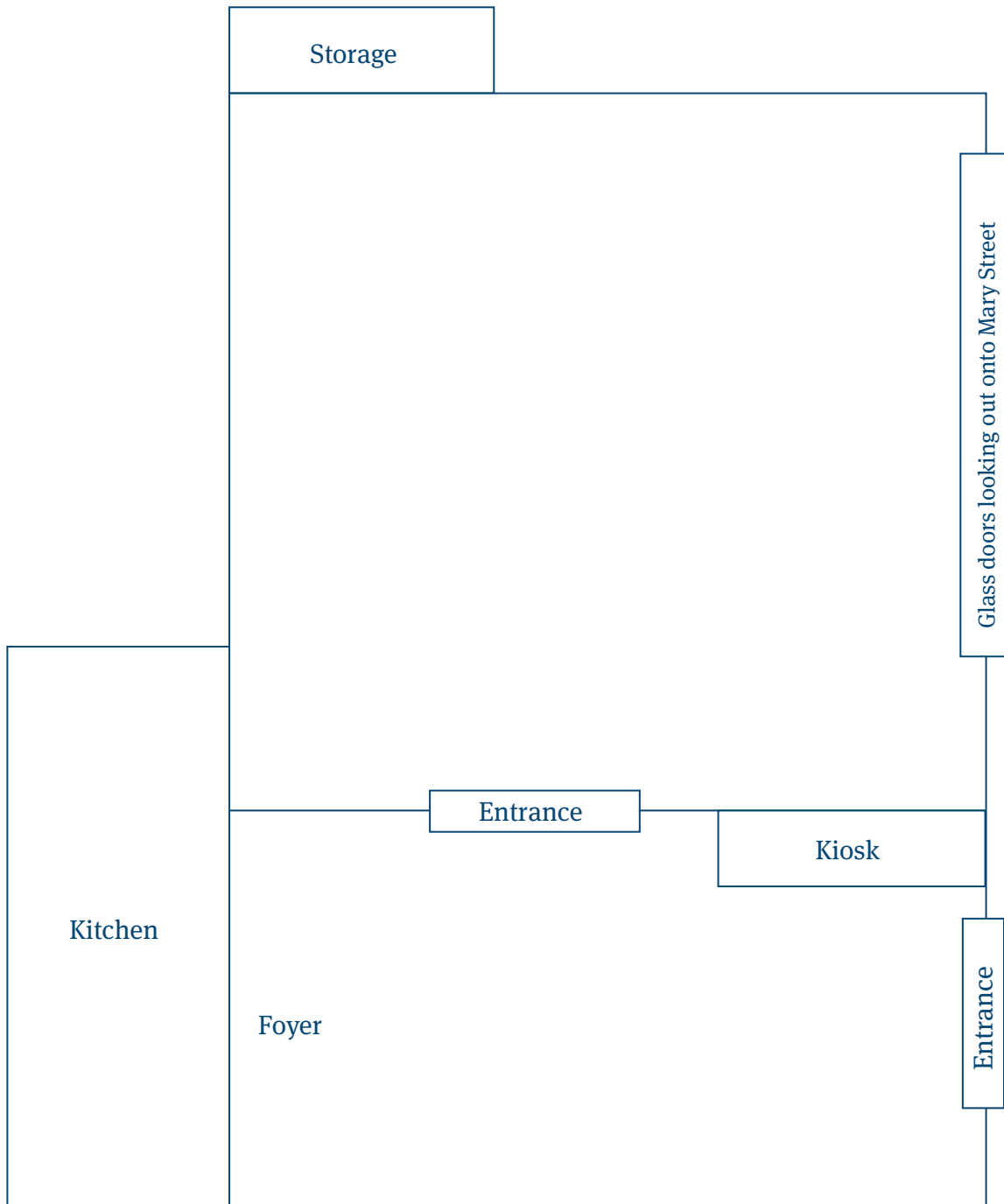
Conference Room setup instructions

Please print clearly

Please retain this sheet for your information, if you are doing your own setup

 YES NO

If you want us to setup for you. Draw in your setup arrangement and fax, mail or email this sheet to us.



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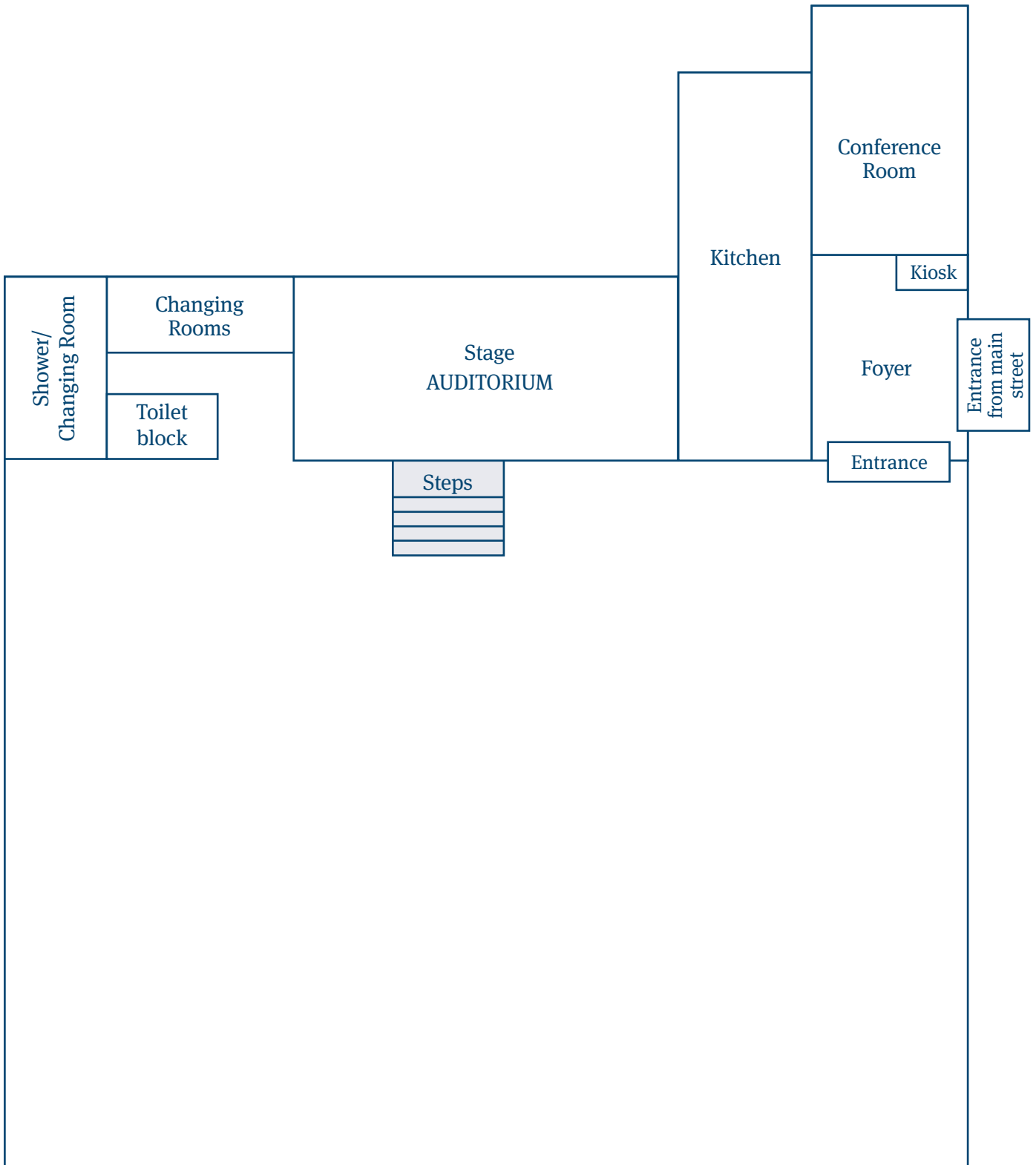
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