



# CAVANBAH CENTRE

249 Ewingsdale Road

Byron Bay NSW 2481

Phone: (02) 6685 5911

Email: [info@cavanbah.byron.nsw.gov.au](mailto:info@cavanbah.byron.nsw.gov.au)

Fax: (02) 6680 8782

## REGULAR USE BOOKING REQUEST

Date: \_\_\_\_\_ Club/Organisation: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_

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

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Number: (BH) \_\_\_\_\_ (Mob) \_\_\_\_\_ (Fax) \_\_\_\_\_

Expected no. of participants: \_\_\_\_\_ Storage requested: Yes / No Dates: \_\_\_\_\_

**Please Note: Start and Finish times include set-up and pack-down**

Day	First Date	Last Date	No. of Wks	Start Time	Finish Time	Length of Time eg.2hrs	Facility / Room you wish to hire	Rate Description eg. Senior Training	\$ Rate per hour	Total

**Notes:** Please specify any additional information about your booking here

## Please circle the following:

Hire fees are paid in full in advance at the time of lodging booking information.

Agree

**Please note this booking will not be secured without the hire fee being paid.**

I understand an invoice, to the hour, will be issued if the start or finish time is not adhered to.

Agree

As a regular booking you may occasionally be asked to alter your booking to allow for "one off" community events. If this occurs you will be given suitable notice and assisted by staff to make alternative arrangements. Please indicate that you understand and accept this as a condition of hire

Agree

Please indicate which cost category applies to your booking (outlined in the User Agreement). If you are a community organisation please provide documentation of your not-for-profit status.

Commercial  
Community

### Public Liability Insurance Declaration

I/we have a current public liability insurance policy. A copy of the Public Liability Insurance Policy Certificate of Currency showing cover to the value of \$20 million is supplied with this booking form

Yes / No

### Risk Assessment Declaration

Please indicate that you will complete a Pre-Inspection Checklist prior to use

Agree

I/we are responsible for the condition of the booked facilities during the hire period, as well as any hazards created in communal areas (e.g. hallways, toilets, foyer). All hazards, spills or breakages will be reported to staff immediately

Agree

**I/We, \_\_\_\_\_ (the "Hirer") hereby declare that I/we have read, understood and completed the booking form. I/We agree to all the terms and conditions of hire as set out in the User Agreement and booking form. I/we will be responsible for total payment of the fees and charges fixed by Council for hire of the facilities. Bookings are guaranteed at the time of payment for the dates and duration of time nominated on this booking form. In nominating a block period of dates you are agreeing to pay in full for the entire duration of time. I/we will be responsible for payment of additional costs such as damages arising. I/we are at least 18 years of age and an authorised signatory of the club/organisation.**

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

Dates of booking \_\_\_\_\_

Hirer Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Staff Signature: \_\_\_\_\_

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

Please tick this box if you would like to receive information on special offers, upcoming events and activities.

### Office Use Only

I confirm that:

- A current certificate of currency is attached to the back of this form (If applicable)
- The declaration has been signed
- A Pre-Use Inspection Checklist has been provided
- Payment has been received and the receipt attached or cheque details written below
- The facility has been booked upon payment being received

Print name: \_\_\_\_\_ Payment Date: \_\_\_\_\_ Payment method: \_\_\_\_\_

**Privacy Statement:** Any personal information you have supplied to or is collected by the Byron Shire Council will only be stored and processed by the Council for lawful purposes directly related to the function and activities of the council. Any personal information will only be disclosed to a third party for the purposes of performing a lawful function or activity and for no other purpose.



## BYRON SHIRE COUNCIL

“A”

### Checklist for Casual and Regular Hirers for hiring a Council Facility in relation to Public Liability

\_\_\_\_\_  
[Name of facility]

**A Casual and Regular Hirers Policy (\$20 million) exists in order to cover hirers using Council facilities.**  
Definitions of “Casual” and “Regular” Hirers are as follows

**Casual Hirer** Any person or group of persons (not being a sporting body, club, association, corporation or incorporated body), who hires a council facility for non-commercial or non-profit making purposes, less frequently than once per calendar month or 12 times per calendar year.

**Regular Hirer** Any person or group of persons (not being a sporting body, club, association, corporation or incorporated body), who hires a Council facility for non-commercial or non-profit making purposes, more frequently than once per calendar month or 12 times per calendar year.

<b>Name of Person Group/Organisation hiring the facility:</b>			
<b>Contact Person's Name (if different to above)</b>			
<b>Telephone No.</b>		<b>Email</b>	
<b>Date(s) of hire of the facility</b>			

The following information must be completed by the applicant

Criteria for Casual Hirer	YES	Comment (if any)
The person, group or organisation <b>is not</b> a sporting body, club, association, corporation or incorporated body.		
a) The hire is for non-commercial or non-profit making purposes. OR		Name the activity to be conducted:  Eg group meeting, wedding, birthday celebration etc.
b) The hirer is fundraising for an individual, a charity or community organisation or group which: i) Is not a sporting group, club, association, corporation or incorporated body; ii) Is not a sole trader or registered business; iii) Is not making a personal financial gain from the activity; iv) Is not a commercial activity; v) Is not a large (eg the halls capacity) evening event where alcohol will be sold or BYO. vi) Provides the committee a signed statement from the hirer and beneficiary that identifies the hirer and the intended beneficiary will be receiving all proceeds made from the activity.		Provide details of the activity.
<i>The person, group or organisation as stated above acknowledges that they are responsible for the claim excess of \$1,000 or \$2,000 (as applicable) per claim.</i>		<b>Signed:</b> <b>Print Name:</b> <b>Date:</b>

Note:

- If the Section 355 Management Committee managing the facility is not satisfied the person, group or organisation meets the “Casual or Regular Hirer” criteria above, the information will be provided to Byron Shire Council’s Insurers for determination of the matter.
- The Section 355 Management Committee has the right to refuse hire of the facility or terminate any hirer’s agreement until they are satisfied Public Liability Insurance requirements are met.



“B”

## PUBLIC LIABILITY REQUIREMENTS

### For any other Hirers

[Name of facility]

**Your own Public Liability Insurance cover is required if you fit into the following criteria.**

- Creates an income or profit from the activity eg. yoga, art, Pilates classes charging a fee for service, workshops by charging door entry, participation fee, prepaid fee.
- Makes a personal financial gain from the activity.
- Is a sole trader or registered business.
- Corporation or Incorporated bodies.
- Sporting body, Club or association of any kind.
- You do not meet the criteria as a “Casual or Regular Hirer”.

<b>Name of Person Group/Organisation hiring the facility:</b>			
<b>Contact Person’s Name (if different to above)</b>			
<b>Telephone No.</b>		<b>Email</b>	
<b>Intended activity to be conducted within the facility</b>			
<b>Date(s) of hire of the facility</b>			

#### DETAILS OF INSURANCE POLICY

<b>The member’s name as shown on the Policy</b>  Note: if different to the name of the hirer above written authorisation is required from the insurer advising the hirer is covered under this policy.	eg person, group or organisation who holds the insurance policy
<b>Name of Insurance Company</b>	
<b>Policy No.</b>	
<b>Period of Cover</b>	
<b>Public Liability Policy in the sum of not less than \$20M</b>	Amount Insured \$
<b>Copy of Insurance Policy attached OR sighted by Committee member</b>	
<i>The person, group or organisation as stated above acknowledges that they are responsible for their own Public Liability Insurance when hiring the Council facility for the intended activity as stated above.</i>	<b>Signed:</b> <b>Print Name:</b> <b>Date:</b>

Note:

- If the Section 355 Management Committee managing the facility is not satisfied the person, group or organisation has adequate insurance, the information will be provided to Byron Shire Council’s Insurers for determination of the matter.
- The Section 355 Management Committee has the right to refuse hire of the facility or terminate any hirer’s agreement until they are satisfied Public Liability Insurance requirements are met.