

## APPLICATION FOR HIRE OF STRATHFIELD COUNCIL **COMMUNITY FACILITIES**

### 1. Available Facilities

Please indicate which Facility you wish to hire for your activity/event.

Strathfield Town Hall	<ul> <li>Main Hall &amp; Supper Room (Capacity 250 Theatre Style)</li> <li>Supper Room Only (Capacity 100)</li> </ul>
Strathfield Community Centre	□ Redmire Meeting Room1 (Capacity 80) □ Airey Meeting Room 2 (Capacity 20) □ Wangal Meeting Room 3 (Capacity 40) Kitchen use – Regular Hirers Only □ Yes □ No
Dutton Community Centre	<ul> <li>☐ Hall (Capacity 80)</li> <li>☐ Meeting Room (Capacity 8)</li> <li>Please note: This venue has limited availability of use</li> </ul>
Homebush West Community Centre	<ul> <li>□ Main Hall (Capacity 250)</li> <li>□ Workshop Room (Capacity 60)</li> <li>□ Office (Capacity 6)</li> <li>□ Upstairs Office (Capacity 20) Not wheelchair accessible</li> </ul>
High Street Community Centre	<ul> <li>Whole Library (Capacity 80)</li> <li>Meeting Room 1 (Capacity 40)</li> <li>Meeting Room 2 (Capacity 40)</li> <li>Please indicate if you require A/V Equipment ☐ Yes ☐ No</li> </ul>
Strathfield Main Library	□ Ironbark Room – Whole Room (Capacity 80) □ Ironbark Room – Half Room with kitchen (Capacity 40) □ Ironbark Room – Half Room with A/V Equipment (Capacity 40) Please indicate if you require A/V Equipment □ Yes □ No □ Melaleuca Room (Capacity 3)
2. Applicant Details  Name of Applicant – Individ	dual Hirer / Organisation / Group
Title	First Name Last Name
Group/Organisation Name	Postcode

**Contact Phone Number** Mobile Number **ABN Number** Postal Address Postcode Contact person for your Group/Organisation (if applicable) Contact Phone No. **Email Address** Title/position in group/Organisation of applicant (if applicable)

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4. B3. Booking Details	and Proposed Activ	vities		
Type of Book	ing			
□ Ca	sual Booking – Less	than 10 booki	ngs in a year	
□ Re	gular Booking – 10 d	or more bookin	gs in a year	
Day of the Week	Date From	Date To	Time From	Time to
1.	_/_/		am/pn	-
2.			_ am/pn	
3. 4.			am/pn am/pn	
٦.			_   am/pm	am, pm
Number of People Atter Seating Theatre Style  If yes, no Tables	<del></del>	ired		
Banquet Style	Yes □ No			
If yes To	ables required	Number of ch	aire ner table	
11 yes, 16	ables required	Number of ch	all's per table	
Type of Activity				
4. Insurance				
Do you have Public L	iability Insurance t	to the value of	f \$20 million?	
If Yes, please attach a co	opy of your current Cer	tificate of Insura	nce	∕es □ No □
<b>NOTE:</b> Proof of Public Liabilit			· · · · · · · · · · · · · · · · · · ·	
Facilities. Please attach a cui for non-insured hirers must b				do not have insurance, a f
	•	_	_	
5. Strathfield Town Ha	II and Supper Room	n ONLY - Cas	ual Hirer	
Will you be hav	ving a live band? (Fach a letter attention to	Please tick bo the General Mai	<b>x)</b> nager requesting permiss	res □ No □ Sion for live band
Will alcohol be	consumed? (Pleas	e tick box)	`	∕es □ No □
<b>If Yes,</b> please attaconsumed.	ach a letter attention to	the General Ma	nager requesting permis	sion for alcohol to be
	ing goods? (Please ach a letter attention to		nager requesting permiss	∕es □ No □ sion to sell goods

Equipment Available	Quantity Available	Quantity Required
Standing microphone stand	1	
Table microphone stand	2	
Microphone – cordless	1	
Microphone	2	
Microphone lead – 5 m	4	
Microphone lead – 10 m	1	
Microphone lead – 20 m	1	
Projector Screen	1	

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# 65 Homebush Road, Strathfield NSW 2135 PO Box 120, Strathfield NSW 2135 | P 02 9748 9999 | F 02 9764 1034 E council@strathfield.nsw.gov.au | www.strathfield.nsw.gov.au | ABN 52 719 940 263

### STRATHFIELD TOWN HALL AND SUPPER ROOM FLOOR PLAN

Please indicate

			t up for your function. Example: chairs to be set up theatre style; s setup required.					
	Eg.							
	_							
	_							
7	. A	greeme	ent					
	Ple	ase Tici	k the box					
			ersigned, hereby make application for the hire of the aforementioned facility on the date(s)					
	mentioned and for the purpose indicated. I undertake to accept and abide by the Events in Council Parks							
			es Policy and the Terms and Conditions for Council Park and Community Facilities Hire, which					
			d and understood. I agree to advise Strathfield Council of any special arrangements at least prior to the hire date/s.					
			e of Applicant: Date:					
	<u> </u>	griatar	Вако.					
0								
8	. A	opiicati	ion Checklist					
	Dla	aco Tic	ek whore applicable					
ΥN			k where applicable					
			Events in Council Parks and Facilities Policy and the Terms and Conditions for Council Park					
шц		_	and Community Facilities Hire has been carefully read.					
		1	Contact information for representatives of the group/Organisation is completed.					
			copy of Public Liability Insurance is attached (if applicable).					
		_	A copy of the group/Organisation's constitution is attached (if applicable).					
		_	All sections of the application have been completed and declarations signed.					
H			Community Rate Request form has been completed and attached to this form (if applicable).					
		_	Not-for-profit certificate of registration is attached (if applicable)					
	= =	_	Town Hall floor plan completed (if applicable)					
		_						
	(	Casual	Hirer -To confirm a booking the application form must be received plus 100% of the hire fee					
			must be paid. No tentative bookings will be accepted.					

Regular Hirer - Payment of hire fee for first month of bookings must be paid in advance.

#### **Privacy Statement**

Personal details requested on this form are being collected and will only be used for the purpose of processing your application, updating contact information and record keeping. The supply of information by you is voluntary. If you cannot provide or do not wish to provide the information sought, Council may not be able to process your application. Access to the information is restricted to Council officers and other authorised people. You may make application for access or amendment to information held by Council.

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