

Public Gardens - Booking Form

Hirer			
Name of Organisation (if applicable)			
Address			
		Purchase Order	
Contact 1		Contact 2	
Phone		Phone	
Email		Email	
Type of event		Group size	
Day of the week		Frequency	
Rate			

Please indicate dates required below:

January	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
February	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 (29)
March	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
April	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30
May	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
June	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30
July	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
August	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
September	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30
October	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
November	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30
December	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

Time required	From		To	
Please include adequate time for setting up and clearing away afterwards	Total hours required		Total cost	

Event type Will tickets be sold? Will food be served?	Public	Private	Will there be exhibition of a film? Will live music be performed? Will recorded music be played?	Yes	No
	Yes	No		Yes	No
	Yes	No		Yes	No

Name of designated responsible adult:

Please list any other equipment items you will be bringing:

By signing here, I am agreeing to abide by the Moulton Parish Council Terms and Conditions of Hire. I am fully aware that any breach of these conditions could lead to me being prohibited from organising an event on Moulton Parish Council land now or in the future.

I understand that I am responsible for the Health and Safety of those participating in and visiting this event and that I comply with any recommendations made by Moulton Parish Council.

I have considered all the provisions necessary to ensure the event is safe and enjoyable for all. I am agreeing that I will provide Risk Assessment/s, evidence of Public Liability Insurance and an Event Plan (if applicable) two weeks prior to the date of my event.

Signed by the person named above and duly authorised on behalf of the organisation named above, where applicable.

Signature	
Date	