



Nottingham Trent Valley Circuit (22/4)
Chilwell Road, Beeston, Nottingham, NG9 1EH
Telephone: 0115 943 1164
Email: admin@chilwellroadmethodist.org.uk

AGREEMENT FOR ROOM HIRE – SINGLE BOOKING 2010/2011

Details of your group:

Name of your group: _____
Your name in full: _____
What position do you hold? Secretary/Treasurer/Chair/Organiser _____
Your full postal address: _____
Telephone: at work: _____ at home: _____
Email address: _____

Requirements for your meeting:

Starting Date: _____ **Day of Week** _____
School term only? / Dates to skip? _____
Time of day: start: _____ finish: _____ doors open at: _____
What room(s) will you be using? _____

Heating: not required / according to season
Coffee Bar/Servery: drinks / food preparation / cooking / extra crockery / tablecloths
Kitchen: (only available to external hirer on production of Health & Hygiene Certs.)
Equipment: amplifier and inductive loop / tables / demountable staging

You undertake on behalf of the hiring organisation, that you **(1)** use the premises by courtesy of the Managing Trustees of this Church, **(2)** are legally bound to pay the hire charge below (in advance if required), **(3)** have no automatic right to future hirings, **(4)** are to observe the arrangements detailed in *Safety Matters, Room Hire Arrangements and Facilities Available at our Church*, which have been supplied to you, and which you have read, **(5)** are familiar with and understand the Home Office Code of Practice "Safe From Harm" and undertake to follow the Code when working with children and those under 16, **(6)** agree to indemnify the Managing Trustees against any loss or damage to the Church premises or contents, or any claim made by a third party for bodily injury or damage arising out of the use of the premises, **(7)** acknowledge that in exceptional circumstances the Church may have to cancel a hiring without being liable for claim. (We shall make every effort to provide an alternative room or an alternative day), **(8)** must return any key issued to you, **(9)** Bouncy Castles it is the responsibility of the hirer to ensure that adequate insurance is in place **(10)** have received a copy of this form.

Your signature **Today's date**

The charge for the event will be:

Total cost _____

Plus £25 refundable deposit for keys

Payments should be sent to:- Mrs. Ann Duffin, 93 Grove Avenue, Beeston, Nottingham, NG9 4DX (9223130). Please make cheques payable to "Chilwell Road Methodist Church".

Administrator's Copy