



CAMDEN COMMUNITY CENTRE INC
 7 Carlisle Street, Camden Park SA 5038
 Phone: 8376 0022 Fax: 8376 0085
 Email: admin@camden.org.au
 Website: www.camden.org.au
 ABN 81 388 249 632

<u>Office Use:</u>
Received copy of Public Liability _____
Signed Conditions of Hire: _____
Dates approved/available: _____
Deposit Paid: _____

Hall and Room Hire Contract
Effective from the 1st July 2007

*This Contract is between _____
 and the Camden Community Centre Incorporated and is effective on the 1st July 2007.*

Date/days/times Requested:.....

Key Collection Time/Date:

Reason for use of the facility: _____

Number of people attending: _____

Special Requirements _____

Facility Requested Hall Potter Rm Reed Rm

User Group Regular Casual once off event

Name of Hirer: _____

Address: _____

Telephone: Home: _____ Mobile: _____

Second Contact:
 Name : _____

Address: _____

Telephone: Home: _____ Mobile: _____

Will alcohol be served? Yes/No (If yes – Hirer accepts responsibility for License requirements)

Hire Fee: \$ _____ includes GST Invoice: Yes/No

Deposit: A deposit of \$50.00 must be paid at the time of making your booking with the balance to be paid 7 days prior to your booking date. If a booking is cancelled within 7 days of the booking date, the deposit will be forfeited.

I have read and understood the Conditions of Hire and agree to abide by them.

Signature of Hirer: _____ Date _____

Signature: _____ Date _____
