

## **Application for Venue Hire**Community, Not For Profit, Commercial or Private Event (less than 1,000 people)

Please note that bookings must be made a minimum of 6 weeks in advance

Preferred Venue:				
Applicant				
Organisation (if applicable)			ABN:	
Description of organisation (e.g. Not for Profit, Community Organisation, Corporate etc)				
Contact person				
Position				
Postal address			,	
Contact numbers	Mobile:	Other:	Fax:	
	Email:			
Organisation/person to be inv	oiced if not as above:			
Please provide details:				
Event details	Please provide details of propos	ed event (if necessary attach addition	onal information)	
Event name				
Event description (eg awards presentation, community celebration)				
Event day and date				
Event time (events can only be held during Parklands normal opening hours)	From:	То:		
Bump-in date (if applicable)	Date:	Time:		
		From:	То:	
Bump-out date (if applicable)	Date:	Time:		
		From:	To:	
Estimated attendance				
Event history	Has this event been held before? ☐ YES ☐ NO If yes,where?			
Entertainment and other inclusions	Please supply details of any of the following planned for your event			
□YES □NO	Stalls (please provide numbers)			
	Commercial	Non-commercial		
□YES □NO	Animals/mobile zoo (please provide details)			
□YES □NO	Amusements (rides etc) (please provide numbers and details)			
□YES □NO	Amplified music/musical instruments/pa system (please provide details)			
□YES □NO	Structures (stages, marquees etc) (please provide details including numbers and dimensions)			
Sale of food/beverage	Will food and/or beverages be sold at your event?			
☐YES ☐ NO	If "Yes", you will need to provide proof of Food Authority Notification.			
☐ YES ☐ NO	Is alcohol being sold or served at the event? If "Yes", you will need to provide proof of current Liquor Licence.			

Version: December 2015

Power and Generators				
☐YES ☐NO	Do you require power if available?			
□YES □NO	Do you propose to use a generator? (If yes, please provide proposed details of type and hours of use)			
First Aid	Please provide details/name of a	qualified first aid officer		
☐YES ☐ NO				
Amenities and Waste Management	Please provide details of the following, if applicable:			
□YES □NO	Will you be bringing in portaloos for your event?			
□YES □NO	How will you be collecting litter?			
□YES □NO	How will you be managing waste generated by your event?  If the Trust determines that additional bins are required, you will be required to pay this cost.			
Signage	Please provide details of the following, if applicable:			
□YES □NO	Do you propose to erect any directional signs? If "yes", please provide details including method of attachment.			
Collection of money	Please provide details if applicable and ticketing			
□YES □NO	Do you propose to collect money? If yes, for what purpose?			
☐YES ☐NO	Will you be charging stall holders, food and beverage suppliers and amusement operators a fee?  Please provide details of these charges.			
□YES □NO	Do you propose to sell tickets? Please provide information regarding your ticketing agent?			
	Please provide an estimate of the ticket price:			
	□<\$20 □ \$20-\$50	□ \$51-\$75 □ \$76-\$100 □ >\$101		
Public Liability Insurance The applicant must arrange to obtain Public Liability Insurance cover for at least A\$20,000,000. You will be required to provide a Certificate of Currency that will be current at the time of your event. The name of the insured must be a legal entity and must be the same as the Applicant. The Public Liability Insurance must name Western Sydney Parklands Trust and the Minister for the Environment and Heritage as interested parties. The Public Liability Insurance must cover the activity described in your application.				
A venue hire fee will be calculated according to the information supplied on this form, and you will be advised of this amount. If you are in agreement then a confirmation letter and invoice will be issued, your booking is not confirmed until all monies owed have been received by the Trust.				
I have read and understood my obligations in regard to Western Sydney Parklands Trust Regulation.				
Signature of applicant:		On behalf of (name of organisation):		
Print name of applicant:		Date:		
If delivering by hand:		If sending by post:		
Western Sydney Parklands Trus Level 7 10 Valentine Avenue Parramatta NSW 2150		Western Sydney Parklands Park Trust PO Box 3064 Parramatta NSW 2124 Phone: 02 9895 7500 Email: events@wspt.nsw.gov.au		

Version: December 2015 2