

**St. Barnabas Church
Premises Hire Booking Form**

1. HIRER DETAILS

Name of Hirer: _____

Organisation (if applicable): _____

Address:

Postcode: _____

Telephone Number: _____

Email Address: _____

2. EVENT / ACTIVITY DETAILS

Name of Event / Activity:

Purpose of Hire:

Type of Event:

- Community Group
- Meeting / Training
- Children's Party
- Family Function
- Charity Event
- Educational Class
- Commercial / Business Use
- Other: _____

Expected Number of Attendees: _____

Will children (under 18) attend?

Yes No

Will vulnerable adults attend?

Yes No

Are you having a Bouncy Castle? (NB Insurance is required)

Yes No

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3. DATE AND TIME REQUIRED

Date Start Time Finish Time Room / Area Required

Please note: Half an hour before and after, the booking is allowed (free of charge) to set up and clear afterwards) All events must finish, and the premises must be vacated by 9:30 pm.

4. FACILITIES REQUIRED

Please tick as required:

- Church Hall
 - Lounge
 - Meeting Room
 - Kitchen Access
 - Tables
 - Chairs
 - Other: _____
-

5. FOOD, MUSIC AND LICENSING

Will food be prepared?

- Yes No Food brought in, stored and served Tea/Coffee only

Will music be played?

- Yes No

Will alcohol be consumed or supplied?

- Yes No

If yes, please provide details:

Does the event require a Temporary Event Notice (TEN) or other licence?

- Yes No

If yes, has a copy been provided to St Barnabas Church?

- Yes No
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6. SAFEGUARDING INFORMATION

(Required for activities involving children or vulnerable adults, except one-off children's parties where parents are present)

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Does your organisation have a safeguarding policy?

- Yes No
 Not Applicable

Have all relevant staff/volunteers received DBS checks?

- Yes No
 Not Applicable

Name of Safeguarding Lead:

Contact Number: _____

Please attach copies of safeguarding policies where applicable.

7. HEALTH & SAFETY

Will you bring any electrical equipment onto the premises?

- Yes No

If yes, confirm equipment PAT tested within the last year:

- Yes No

Do you have a risk assessment for this activity?

- Yes No

If requested, can a copy be provided?

- Yes No
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8. INSURANCE

Do you hold Public Liability Insurance?

- Yes No

Insurance Provider:

Policy Number:

Expiry Date:

Bouncy Castle Insurance Details

Insurance Provider:

Policy Number:

Expiry Date:

Please attach a copy of your insurance certificate(s) if applicable.

9. DECLARATION

I confirm that:

- The information provided on this form is accurate.

**St. Barnabas Church
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- I have read and agree to comply with the St Barnabas Church Conditions of Hire Agreement.
- I understand that the booking is not confirmed until approved by St Barnabas Church.
- I accept responsibility for the conduct of all attendees during the hire period.
- I agree to leave the premises clean, tidy, and secure after use.

Signed:

Name: _____

Signature: _____

Date: _____

PAYMENT

Electronic payment is preferred:

HSBC Hull, Jameson Street Branch Sort code: 40-25-49 Account number: 30367656

Account name: St Barnabas PCC Use your name and booking date as the reference

We also have a card reader, and we can accept cheques or cash.

OFFICE USE ONLY

Booking Approved: Yes No

Approved By: _____ **Date Approved:** _____

Hire Fee: £ _____ **Deposit Required:** _____

Deposit Received: Yes No N/A **Payment Received:** Yes No N/A

Insurance Certificate Received: Yes No N/A **Safeguarding Docs:** Yes No N/A

TEN / Licence Received (if applicable): Yes No

Additional Notes:
