

ELSTOW BUNYAN CHRISTIAN FELLOWSHIP
High Street Elstow Bedfordshire MK42 9XP

CONDITIONS FOR USE OF PREMISES

Please read and complete this form and return it to Brian Addington at 17 Dorchester Way Elstow Bedford MK42 9FF. If you have any questions please telephone 01234 216080.

Applicants must satisfy themselves that the premises are suitable for the purpose for which they are required **and that they (the applicants) have appropriate insurance cover**, as our insurance does not cover outside organisations who hire our premises.

Payment A deposit of £20 will be required at the time of booking, the balance to be paid 10 days before the day the building is to be used.

Bond A bond of £20 will be required. This will be returned within 10 days of the event, provided the premises are left clean and tidy, no breakages or damage are discovered, and the heating Thermostat in the hall has not been altered.

Kitchen There will be an extra charge of £10 for the use of the kitchen.

The kitchen is to be left clean and tidy, with all cooking oils etc. removed from the premises.

Smoking Smoking is not permitted in any part of the building.

Alcohol No Alcohol to be brought onto, or consumed on, the premises.

Fire Safety Please familiarise yourself with the building and ensure your guests know what to do in case of a fire.

Child protection Hirers are responsible for ensuring that all issues relating to Child Protection/Safe From Harm are adhered to.

Notices Must not be stuck on walls or over existing notices.

Security All personal possessions are the responsibility of each individual.

Damage Any damage or loss to our premises, property or services, to be repaired or replaced, as appropriate, at the expense of the user.

Accidents Any accident to person or property must be reported to Brian Addington as soon as possible after the incident has occurred.

Before leaving All lights and electrical equipment in the building (except the fridge) must be switched off.

All doors must be secured/locked as appropriate.

Continued/

Name of Individual/Organisation: _____

Name of Applicant (if different): _____

Address: _____

Post Code: _____ Telephone: _____

Date/dates & time of event(s): _____

Nature of event(s): _____

Numbers attending: _____

Specific requirements: _____

I/We the undersigned, accept:

- 1) Elstow Bunyan Christian Fellowship cannot be held responsible for loss, damage or injury sustained at the Elstow Bunyan Memorial Hall High Street Elstow MK42 9XP if associated to, or connected in any way with the event, or control of the event, to which this booking relates.
- 2) as signatory of this form, I am/we are responsible for meeting all of the above conditions for use of the premises.

Signed:

Name: (printed please)

Address: (if different from above)

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Post Code: Telephone:

Dated:.....

FOR CHURCH USE

Church diary _____

Church Secretary _____

Church Treasurer _____

Accepted _____ Date confirmed by telephone/letter _____

