

## **Facilities Hire Booking Form**

Name of Club / Organisation:		
Contact Name:	Contact Tel. Number:	
Contact Email Address:		
Alternative Contact Name / Number:		
Invoice Address:		
Type of Event:		
Facilities/Room(s) Required	Date(s)	Time(s) – Start and end time (include setup/break down if applicable)
Equipment Required		Numbers of people who will be on site
		No. Using facilities:
		Additional People on Site (Spectators etc.):
Special Requirements / Additional Informa	ation:	
Quoted Charge (See conditions below)	£	
Cancellation(s) must be confirmed in writing	ing once Booking Form h	nas been signed to avoid charges.
I hereby apply for use of the facilities detail which has been supplied to me. I undertake conditions or paid on receipt of invoice.		
Signature of Hirer:	Date:	

Please sign and return one copy of the Booking Form and Terms & Conditions of Hire to: Lettings, St John Fisher Catholic High School, Park Lane, Peterborough, PE1 5JN. You will receive confirmation as to whether your booking request has been successful. Until you receive confirmation from the School, your booking must only be considered provisional. Bookings will always be subject to meeting the conditions laid out in the Terms & Conditions of Hire.