# REQUEST FORM SYNTHETIC FOOTBALL FIELD FAIRFIELD SHOWGROUND - REQUEST FORM



ORGANISATION / H	HIRER		
Organisation name			
CONTACT PERSON			
Title (Mr/Mrs/Ms/Miss/Other)	Given name/s	Family Name (Surname)	
Address		Suburb	Post Code
Contact number Home:	Work:	Mobile:	
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E-mail Address:		_	
HIRE DETAILS			
The standard operating depending on the natur	hours for the Synthetic Fiel e of the event.	ld are 9am – 9.30pm. Earlier opening may	be negotiated,
Purpose of synthetic	field hire:		
Coaching* Sch	nool sport Social use	e other (please specify)	
Sport/activity		Approx. no. of peo	ple
*Coaches: appropriate	accreditation and insurance	es are required.	

Week day	Synthetic or Turf Field	Time from	Time to	Start date e.g. 3 Feb 2020	End date e.g. 7 Feb 2020
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

# REQUEST FORM SYNTHETIC FOOTBALL FIELD FAIRFIELD SHOWGROUND - EXPRESSION OF INTEREST



## HIRE FEE'S & CHARGES

	Full field per hour	
Commercial Bodies	\$200	
Local Not for Profit Org/Bodies Casual Hire	\$140	
Local Not for Profit Org/Bodies Regular Hire (minimum one hire per week for 12 weeks)	\$120	
In addition to the above the following charges will also apply as required:		
Lights (additional fee)	\$20 per hour	
Cleaning & Damages Bond	\$500	
Key deposit	\$100	

# NOTE: THIS IS ONLY A REQUEST FORM - NOT A CONFIRMATION

Your request will be confirmed in writing.

I have received and agreed to comply with the terms and conditions attached

Applicant signature	•	Date	٠

# COMPLETE FORM AND SEND TO showground@fairfieldcity.nsw.gov.au

## **CONTACT US**

Fairfield City Council 86 Avoca Road, Wakeley PO Box 21, Fairfield NSW 1860 www.fairfieldcity.nsw.gov.au 9725 0334

Hearing impaired (TTY) 9725 1906 Interpreter Service (TIS) 131 450 mail@fairfieldcity.nsw.gov.au

## **OFFICE USE ONLY**

Date received	Staff name
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Booking form sent Public Liability Insurance received

B Keys Issued Confirmation sent