**ROOM HIRE BOOKING FORM**

|  |  |
| --- | --- |
| **Contact** **Person** |  |
| **Organisation** **Name** |  |
| **Address** |  |
| **Email address for invoice:** |  |
| **Telephone** |  |
| **Your invoice** **reference/ Purchase order ref.** |  |

|  |  |
| --- | --- |
| **Course/group****name**  |  |
| **Date Required** |  |
| **Time from** **and to** |  |
| **Any Special Requirements** |  |
| **No of adults** |  |
| **No of Children** |  |
| **No of Tables** |  |
| **No of Chairs** |  |
| **Disabled access and lift available** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ROOM** | **ACTIVITY****TIME** | **SETUP****CLEARUP TIME** | **TOTAL****HIRE TIME** | **RATE PER HOUR** | **TOTAL COST** |
| Mollie Green Room |  |  |  | £10.75 |  |
| Interview Room |  |  |  | £7.50  |  |
| On Site Security |  |  |  | £36.00 per hour \*\* |  |
| \*\* see Terms and Conditions page, section 2  |  | **TOTAL AMOUNT PAYABLE**  | **£** |
|  |
| **Prices include the use of the following subject to availability (please cross):** |
| Kettle and Cups (for self-catering)) | [ ]  | Flipchart Stand and Paper | [ ]  |
| Overhead / IT Projector  | [ ]  | DVD Player | [ ]  |
| Wipe board | [ ]  | Extension Lead | [ ]  |

Photocopying available at a small charge

**Please read terms and conditions overleaf and sign before returning**

**Please return to: Above address**

or email: robsack@fsncharity.co.uk

A Company limited by guarantee registered in England No. 371615. Registered

Charity No.208446 Website: [www.fsncharity.co.uk](http://www.fsncharity.co.uk)

Patron: Baroness Fookes DBE DL, The Right Revd. Dr Martin Warner MA PhD

**As an aid to monitoring footfall during our funding returns and the implementation of our**

**Equal Opportunities Policy, we would be grateful if you could assist by signing in when you arrive for your meeting.**

**We would also be very grateful for any comments your group would like to make in the Comments Book held at Reception.**

 **TERMS AND CONDITIONS**

* + - 1. Please remember to include time for setting up and clearing away within your hire time and total cost calculations, as it will not be possible to access hired rooms until the agreed time unless previously negotiated. In addition, rooms must be vacated at the agreed time so that they are available for the next user. A charge will be levied for any time used over and above that previously booked. **Minimum hire period is 1 hour**
			2. For weekend hire there will be a charge of £36.00\*\* per hour for a security person to be present on site throughout the event, to include the unlocking and locking of the building.
			3. If the booking is a late afternoon/evening finish when FSN staff are not around, hirers/group leaders are responsible for ensuring that all members of the group are off the premises (especially minors) and that windows and doors in the room(s) you are hiring are closed before leaving the premises.
			4. Hirers are responsible for the cost of any damage to the grounds, buildings, fixtures, fittings and contents incurred by their group members.
			5. FSN is covered by Public Liability Insurance, no liability is accepted by the management for personal accident or injury sustained by another person. HIRERS ARE REQUIRED TO CARRY THEIR OWN PUBLIC LIABILTY INSURANCE.
			6. A risk assessment should be undertaken for each new booking [see page 4]– If help is needed completing this form please speak to FSN staff who will happy to assist.
			7. If any session is cancelled at less than 7 days notice, and the facility is not re-let, the hirer maybe liable to pay the full charge.
			8. Publicity Material to promote your event(s) at the Centre must have approval of FSN Management before being distributed.
			9. FSN is designated as a non-smoking area. The hirer is to ensure that those who smoke do so away from the grounds of the Centre and use the public bins.
			10. First aid facilities are available from the reception office, hall and playroom during office hours. However it is the responsibility of hirers to ensure arrangements in respect of first aid are available during the period of hire.
			11. In accordance with Health & Safety Regulations Group Leaders are asked to keep a daily/weekly register of those attending activities so that, in the event of a fire, this register can be checked. FSN may also ask users to let us know the number of people attending activities, to monitor footfall at the Centre.**.**
			12. In accordance with local fire regulations, no naked flames or smoke generating equipment should be used on the premises.
			13. Hirers are reminded that they and their group should be fully conversant with the procedures to be followed in the event of an emergency. At the sound of the fire bell Hirers/Groups should immediately vacate the building by the nearest safest fire exit (do not use the lift) and assemble in the car park. A member of FSN or the Fire Brigade will inform groups when it is safe to return to the building. Group leaders should assist all members of their group to vacate the building bringing their attendance registers for head counts.
			14. The main entrance door should be kept shut at all times. It can be an inconvenience but it is for the safety of all who use the building. This is strictly limited to genuine authorised users. We ask that you do not take responsibility for other groups, please avoid admittance to anyone who is not a member of your group/activity, if they belong to another group that group will allow entry.
			15. Any problems with unauthorised persons trying to gain entry or behaving in an abusive manner should not be tolerated. Please notify the police **immediately** if there are problems. Also please notify the Centre as soon as possible of any problems encountered on 01424 855222 to enable the matter to be looked into.
			16. There is parking on site plus on street parking in the vicinity.
			17. FSN reserves the right to cancel this agreement if the centre is closed for official or electoral purposes or staff training. Additionally, FSN reserves the right to cancel this agreement at the manager’s discretion.

|  |  |  |
| --- | --- | --- |
| **NAME** | **SIGNED**  | **DATE**  |
| **Group/organisation** |  |  |

**CATERING /REFRESHMENT BOOKING FORM**

FSN are able to support room bookings with a range of refreshments from the following choices:

**Room refreshments can be set up in your room for you to access at your leisure. Please note that 2 weeks notice is required for Catering**

|  |  |
| --- | --- |
| **Name of Group** |  |
| **Date of booking**  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Drinks**  |  | **Order Number****(e.g. no of cups of each)** | **Cost**  | **Total**  |
| **Tea**  | **75p per cup**  |  |  |  |
| **Coffee** | **75p per cup**  |  |  |  |
| **Squash**  | **20p per cup** |  |  |  |
| **Juice Apple** | **60p per cup**  |  |  |  |
| **Juice Orange**  | **60p per cup**  |  |  |  |
| **Biscuits**  | **25p per person** |  |  |  |
| **Fruit** | **40p per piece** |  |  |  |

**CATERING OPTION: In addition to refreshments, FSN’s catering can offer light lunch options:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Food Choice**  | **Cost per person**  | **Numbers required**  | **Total**  |
| **Mixed tray of Sandwiches**  | **From £1.50** |  |  |
| **Scones or Cake** | **£1.00 each** |  |  |
| **Fruit** | **40p per portion** |  |  |
| **Please discuss with Centre Staff if you have any special dietary requirements** |

**PLEASE NOTE THAT MENUS CAN BE DESIGNED WITH YOU TO CREATE THE PERFECT LUNCH FOR YOUR GROUP**

 **[2 weeks’ notice required]**

**PLEASE SPEAK TO RECEPTION STAFF**

| **RISK ASSESSMENT****(to be completed with room booking form and returned before booking commences)** |
| --- |
| Hirer’s Organisation |  | **Tel:**  |
| Risk Assessor’s name |  |
| Room/Area in Centre |  |
| Task/Activity |  |
| Number of adults |  | **Number of Children** |  | **Age Range of children** |       |
| Date of booking |  | **Date Risk Assessment completed** |  |
| **Terms of hire noted: [[1]](#footnote-1)** | YES [ ]  NO [ ]  | **Evacuation procedures noted:** **[[2]](#footnote-2)** YES [ ]  NO [ ]  |
| **1. Are any electrical appliances being brought into the building**   | YES [ ]  NO [ ]  |
| **If yes, please give description /PAT Testing Date:**       |
| **2. Will a First Aider be present?** | YES [ ]  NO [ ]  |
| 3. Description of Activity / any hazards associated:None |
| Consequence of Hazard Minor injury [ ]  Major Injury [ ]  Disability or Death [ ]   |
| Persons at Risk:      |
| **Current Control Measures:** |
| Please mark appropriate number (1 = very low, 5 = very high) and Risk Priority Rating |
| **Risk Likelihood :**1 [ ]  2 [ ]  3 [ ]  4 [ ]  5 [ ]  | **Risk Severity :**1 [ ]  2 [ ]  3 [ ]  4 [ ]  5 **[ ]**  |
| **Risk (Likelihood x Severity) =** |       |
| **Risk Priority Rating** | [ ]  High (16 – 25) [ ]  Medium (9 – 15) [ ]  Low (1 – 8) |
| **Recommended Control Measures**      |
| **Revised Risk Priority Rating****(L) x (S) =** | [ ]  High (16 – 25) [ ]  Medium (9 – 15) [ ]  Low (1 – 8) |
| **Signature of Assessor** |  |
| **Date** |  |

 As per Hire Terms on Page 2 of Robsack Centre Booking Form

 2 As per Hire Terms on Page 2 of Robsack Centre Booking Form and as displayed in room hired

1. [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)