Millswood Croquet Club
20D Millswood Crescent
Millswood 5034

FACILITY BOOKING FORM

Booking Details Booking No:_____/26

Hirer Name _____ email_____

Organisation _____ Telephone _____

Address _____

Purpose of Hire _____

Date of Hire _____ Start Time _____ Finish Time_____

No of Attendees _____

Additional Information / Requests _____

_____

Hire Fee / Due _____ Deposit / Due_____

Final Payment Due _____

Cancellation made by (days before event) will receive a full refund of the deposit.

Cancellation made (number of days before event) will result in forfeiture of deposit.

Cleaning Fee: Undertake own cleaning / Cleaning fee $150 (delete as appropriate)

Agreement: The hirer agrees to hire the facilities as detailed above and is responsible for any damage to the venue or club equipment during the event.

PRINT NAME _____ DATE _____

SIGNATURE OF APPLICANT _____

SIGNED ON BEHALF OF MILLSWOOD CROQUET CLUB _____

POSITION _____ DATE _____