

Please note: Hirer to complete sections A, C, D & E. Section B for Admin only

Libraries & Learning Service APPLICATION TO USE LIBRARY PREMISES

SECTION A

JECTION A	<u> </u>											
Name of	Organisation:											
Invoice Contact Details:- [Name, Address, Email]							deta	Lead Person contact details (if Libraries Unlocked access required) Lead Person				
								Email address:				
(double c	organisation: click on check box and checked' under default	Commercial Registered Charity Profit Making Non-Profit Making Internal					(inc	pose of hire luding estimendees)		ed no. of		
	ershire County Council o	_	-	ente	r yc	our Cost	Evt	arnal custon	no	rc Dlasca		
Centre co	ode AND order no. belov	w if known.						External customers Please enter your Order no. if			ORDER NO:	
COST CEN	NTRE:	ORDER NO:						known				
SECTION	<u>B</u>										•	
Confirm	nation of your Room	ı Size	and Faci	ilities	s/L	ibrary S	pace r	equireme	nt	ts		
	Name of Libi											
Library S	pace/Name or Room No											
	Date/s requi					1					T	
	Time requi	ired: From: To:					Half Da	Half Day (3½ hours)				
Librarie	s Unlocked access requi	red?	Yes 🗌			1	No 🗌					
		Cons	.II /I +b .			-1-1	0	la /C:: ::-		- i++:\	12,500	la\
Standard	1	Small (less than 6 people)					8 people (Space permitting) Bronze			nitting)	Large (12+peop Silver	ie)
Intermediate		Bronze			╬		Silver		╡		Gold	H
High		Silver			<u> </u>		Gold		╡		Gold	
_	e (The Hive only)	Platinum		-	1		Platinum		╡		Platinum	H
SECTION C		Hacmani					1 latilla	···	_		Hatillalli	
	-	ng you	ng your own equipment				Yes 🗌	/es				
(All equip	st the equipment you wi oment must be PAT teste t and pens available on r	d or u	sed with a	circui	t bi	reaker)						
SECTION D Declaratio	<u>)</u> n (*delete whichever not ap	plicabl	e)									
with	firm that the organisation	(Name of I	nsurer	<i>),</i> P	olicy num	ber					
is the	h the County Council to a greater.	arrange	e Public Lia	bility	cov	er, and I v	vill pay	the premiun	n c	of 10% of th	ne hiring fee or £2	whicheve
SECTION E												
conditions may be inc	lication is approved I under s of hiring and to indemnify curred as a result of the hiri of statutory duty of the Cou	the Cou	unty Council and except	agains	st a	ny accident	s or dam	nage to Count	y C	Council prope	erty or injury to pers	sons which
Date:			Sign	ature	of	Applicant	:					
Date:			Use	Appr	ove	ed:						

On completion, this form should be returned to the Library Manager of the venue. You will receive written confirmation of your booking and the total cost via email or post.