## **BOOKING FORM FOR INDIVIDUALS**

## Kilham Village Hall

DATED						
PARTIES	1. Kilham Village Hall					
	2.					
	e Hall named in clause 1.2 acting be n or organisation named in clause		ommittee ("Village Hall").			
<b>AGREED</b> as foll	lows:					
Hirer to period(s of this a	s) described in clause 1.1. The de	ause 1.5 for the purpetails inserted in sub- t includes the annexe	ose described in clause 1.6 for the clauses 1.1 to 1.6 below are terms ed Standard Conditions of Hire and			
<b>1.1</b> Date	(s) required:					
Day		Time: From				
		То				
Time you requaccess to F	uire	Setting up Time				
a. F	Village Hall Registered Charity Number: Authorised Representative:	1078405 Jenny Walker (Chair) 01262 420042 Gerard Conlin (Treasurer) 01262 420883				
	rer:					
C. I	Name					

d. Address	
e. Email Address	
f. Contact Telephone Numbers	
1.4 Hire Fee	Deposit
	total fee. (In the case of all-day functions and special nce of the booking fee is payable on conclusion of the signing hereof).
Balance	
Commercial use? Yes/No (If Yes, Public Li	ability Insurance certificate must be produced)
<b>1.5</b> Premises (Main Hall, Meeting room).	
Main Hall	
Meeting Room	
Both	
<b>1.6</b> Description of hiring	
This will be a public/private event?	

2 It is hereby agreed that the Standard Conditions of Hire together with any additional conditions Imposed under the Premises Licence (see the Terms and Conditions of Hire document) or that the village hall management committee deem necessary shall form part of the terms of this Hiring Agreement unless specifically excluded by agreement in writing between the Village Hall and the Hirer.

pursuant to the Contr party to this Agreeme	acts (Rights of Third		•		•			
As witness the hands	of the parties heret	0:						
Signed by the person	(s) named at 1.2 (b)	above, duly a	uthorised, on be	ehalf of	the Village Hall's			
	Date							
The information coll regarding your booki parties without your purposes set out abo	ng and to generate a	an invoice. No	information wi	ll be sha	ared with any third			
I agree to being conta	acted by: (Please tick as	appropriate)						
☐ Email		Phone			Post			
Please note that sign	atures do not need t	o be witnesse	Date d.					
Additional Requirem	ents.							
I Require the use o	f the Stage (Extra ch	arge of £10)						
Please return your bo Mr Gerard Conlin 4 Middlewood Close Kilham Driffield YO25 4SU	ooking form (s) in pe	rson or by pos	st to:					

Cheques should be made payable to Kilham Village Hall Association.