



Registration Form Room Hire Margaret River Community Centre

Business or organization name (if applicable):	
Contact Name:	Tel:
Second contact (optional):	Tel:
Contact email for booking info, invoicing & correspondence:	
Activity being conducted:	
One-off <input type="checkbox"/> Recurring <input type="checkbox"/>	
Tick if venue is required on Public Holidays <input type="checkbox"/> School Holidays <input type="checkbox"/> 2wk Christmas-NY <input type="checkbox"/>	
Payment arrangement: Invoice issued monthly <input type="checkbox"/> Cash prior to booking <input type="checkbox"/>	
Agreement: I have received and agree to the Margaret River Community Centre terms and conditions for room hire <input type="checkbox"/> (for phone registration, staff to tick)	
Name: _____ Sign: _____ Date: _____	

Booking Request

*Please record exact time of your activity and we will allow for crossover time between bookings.

Room	Date & Day	Time	Agreed fee
			\$
Projector: \$10/hire			\$
Would you like your activity promoted on MRCC's Facebook page occasionally and Radio MR? Send png or jpg to communications@mrcc.com.au			YES or NO
For commercial use of kitchen:			
<ul style="list-style-type: none"> • Does hirer agree to maximum of 12 hrs/week over a maximum period of 6 months <input type="checkbox"/> • Has MRCC submitted a CKR to AMR Shire? (This is needed before you can register as a food business) <input type="checkbox"/> • Does MRCC have a copy of your AMR Shire 'Certificate of Registration of a Food Business' <input type="checkbox"/> 			
Key arrangements:			
Cancellation policy: 48 hours notice required or full fee will be charged <input type="checkbox"/> OFFICE USE: Skedda entry <input type="checkbox"/>			