**Shape

Description automatically generatedVenue Hire Request Form**

**Two business days’ notice is required for a New venue or Alterations to a booking**

**APPLICANT DETAILS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Contact Name** |  | | **Phone:** | |
| **Email** |  | | | |
| **Company** |  | | | |
| **Postal Address** |  | | | |
| **Commercial / Not For Profit Group** | |  | **ABN:** |  |

**FUNCTION DETAILS**

|  |  |
| --- | --- |
| **Event Name** |  |
| **Event Type** |  |
| **Event date/s** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Times – in 1 hour blocks on the hour or ½ hour.**  Multiple days/times can be listed here | **Set Up Time**  **(Actual time access required)** | **Event Start** | **Event Finish** | **Departure Time**  **(actual time all will have departed)** |
|  |  |  |  |
| PLEASE NOTE – we **DO NOT** provide room set-up or Refreshment needs | | | | |
| **Facilitator** |  | | **Mobile number** |  |
| **Campus Preference** |  | | **Number of Attendees** |  |
| **Venue Preference** |  | |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  | | --- | --- | --- | | **ROOM FACILITIES REQUIRED** | | **Extra charges apply for the items below** | |  | *Internet* | *Video Conference* | |  | *Data Projector* | *Tele Conference* | |  | *Presenter Computer* | *Piano – Orange 3 and Orange 6.1.08 only* | |  | *Lectern* | *\*Software installation (2 weeks’ notice required)* |   **\*If Software installation required please provide the name of the software, license number and version number.**   |  |  |  |  | | --- | --- | --- | --- | | ***Will attendees be consuming food / drinks?*** | **NO** | **YES** | (Delete one) |   **Additional cleaning may be required after any event involving food and/or beverages.**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Alcohol *–*** | *No alcohol available* | *Providing Free Alcohol* | *Selling Alcohol* ***-*** | *Copy of Liquor License Required* | | (Delete / cross out the options not applicable) | | | | |   Please provide a copy of your ***Public Liability Certificate of Currency.***  Your event is not confirmed until a Contract has been exchanged. A Confirmation email will be sent on your acceptance of the Contract and Terms and Conditions. |

**FORWARD COMPLETED FORM TO:** [**roombookings@cdu.edu.au**](mailto:roombookings@cdu.edu.au) **Telephone (08) 8946 6500**

**Charles Darwin University, Ellengowan Drive, Darwin 0909 NT Australia**