**Facilities Hire Form**

*Email version*

**The Strongpoint Centre**

**Chowdene Chapel
660 Durham Road
Low Fell
NE9 6JA**

**1. Personal Information**

**Full Name:** ……………………………………………………

**Organisation Name (if applicable):** ……………………………………………………

**Address:**
*Street,* ……………………………………………

*City,* ………………………………………………

*Postcode* ……………………

**Email Address:** ……………………………………………………

**Phone Number:** ……………………………………………………

**2. Event Information**

**Purpose of Hiring:** *(Provide a brief description of the event)*

………………………………………………………………………

………………………………………………………………………

**Date(s) of Hire:** *(A date or a range of dates for the event)*
………………………………………………………………………

………………………………………………………………………

**Time of Event:**

* **From:** (*The starting time)* *: ………………………………………………*
* **To:** (*The ending time)* *: ……………………………………………………*

**Additional information***: ……………………………………………………*

**Expected Number of Attendees:** **……………………………………………………**

**3. Facilities Required**

Please select the areas of the church you wish to hire:

* ☐ Upper/Main Church Hall
* ☐ Lower Hall
* ☐ Meeting Room
* ☐ Kitchen Facilities
* ☐ Other (please specify)......................................................
*Enter any specific facilities or rooms required*

**4. Additional Information**

**Do you require the use of any equipment?**

* ☐ Yes
* ☐ No

*If yes, please specify:*
*Describe any equipment (e.g., sound systems, chairs, tables)*

**Will you be serving food or beverages?**

* ☐ Yes
* ☐ No

**Will alcohol be served at the event?**

* ☐ Yes (Please note that special permission is required)
* ☐ No

**Do you require access to kitchen facilities?**

* ☐ Yes
* ☐ No

**5. Safeguarding**

If your event involves children or vulnerable adults, you are required to comply with the church’s Safeguarding Policy.

**Will your event involve children or vulnerable adults?**

* ☐ Yes
* ☐ No

*If yes, please confirm that all relevant staff and volunteers have undergone DBS checks:*

* ☐ Yes, all necessary checks have been completed
* ☐ No, checks are in progress

**6. Insurance and Liability**

**Do you have public liability insurance for your event?**

* ☐ Yes
* ☐ No

*If yes, please email your public liability insurance certificate (PDF or Image)*

**7. Payment Information**

**Hiring Fee (if known):** **……………………………………………………**

**Deposit Amount (*if applicable):*** **……………………………………………………**
(At least one-third of the total cost is required to confirm the booking)

**Preferred Payment Method:**

* ☐ Bank Transfer
* ☐ Cash
* ☐ Cheque

**8. Terms and Conditions**

By submitting this form, you confirm that you agree to the terms and conditions outlined in the **Strongpoint/Chowdene Church Facilities Hire Policy** and the church’s Safeguarding Policy. You also agree to ensure that the facilities are used responsibly and respectfully.

* ☐ I have read and agree to the **Facilities Hire Policy**.
* ☐ I have read and agree to the **Safeguarding Policy**.

**9. Signature: ………………………………**

**Signed by: Name: ………………………………**

**Date: ………………………………**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

By typing your full name below, you electronically sign this form and confirm that all information provided is accurate.