

Sportsground User Application

1. Name of organisation: _____

2. Contact name: _____ Ph No. _____ e-mail _____

President: _____ Ph No. _____ e-mail _____

Secretary: _____ Ph No. _____ e-mail _____

3. Organisation Address: _____

4. What sports activities do you undertake on Council sports grounds?

5. What Council grounds are you wishing to book? *(Tick appropriate box):*

A & P Park Horton Park (grass) Renwick Domain

Athletic Park College Park (grass) Oliver Park

Endeavour Park Horton Park (courts) Havelock Domain

Lansdowne Park Other *(please identify)* _____

6. Current number Junior Grade Sides

7. Current number Senior Grade Sides Women's Men's

8. What facilities would you use on the Park(s) identified?

Lights Changing Rooms Equipment

Toilets Halls

9. What days/nights is your event booking for *(period through to):*

(If you are wishing to use more than one park please answer Q11 & 12 on separate sheets) and to assist in full utilisation of our parks please be as specific as possible.

Times													
Sat		Sun		Mon		Tues		Wed		Thur		Fri	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(tick appropriate box)

10. Do you require training grounds, which days/nights would training be held:

Times													
Sat		Sun		Mon		Tues		Wed		Thur		Fri	

(tick appropriate box)

11. What will be your pitch/field number requirements per park: _____
(numeric please)

12. Do you have any specific requirements for your sport, If so what? Yes No
(Expand if necessary) _____

13. Does your organisation have Public Liability Insurance? Yes No

14. Does your organisation have a Health and Safety Plan? Yes No

15. Does your organisation undertake risk assessment around your activity? Yes No

16. What other facilities do you think are required on the sportsgrounds of your choice?

17. General comments:

Record No.