



# COLERAINE GRAMMAR SCHOOL FACILITY BOOKING FORM



*This form should be used to book any facility within Coleraine Grammar school premises.*

Name of Organisation/School/Club	
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Event/Activity/Proposed Use (Please state clearly)	
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Day	Date	Area Required (i.e. Sports Halls, Humphries Hall, Templeton Hall Swimming Pool, etc) <i>State all that applies/required</i>	Time From	Time To

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Estimated number of participants (age range)	Numbers requiring Changing facilities	Female	Male	Disabled Changing Facilities required	Yes	No

Any equipment/and or set up requirements needed. Please state clearly number required.	
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Single/casual bookings must be paid in full 7 days before the date of the booking. N/A

Block Bookings - Please outline your anticipated method of payment. Please tick as appropriate	<input type="checkbox"/> Payment in advance	<input type="checkbox"/> Payment by Invoice (Authorised bookings only)
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<b>Invoice Address</b> If applicable, please state the name and address you would like your invoice sent to:	Name _____ Address _____ Post Code _____ Email Address _____
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- We will require a 60-minute handover period to ensure the facility is clear to aid with necessary cleaning and checks to be completed before the next booking.
- Booking times **MUST** include set up/clear up time.
- School Bookings - the instructor accompanying a class **MUST** provide numbers at both the reception and sign off numbers with the Swimming Instructor. This also applies to hall bookings.

<b>Equipment</b>	Ensure any equipment provided by the group is inspected and in a safe working condition. Please note external equipment may be subject to check by the Estate Manager.
<b>Public Liability Insurance</b>	As part of the terms and conditions of your hire, you will be required to submit a copy of your public liability insurance which must carry a minimum liability threshold of 10 million.
<b>Swimming Pool Users</b>	Users will need to ensure that they have read, agreed and signed the Schools Swimming Pool Administrative Instructions policy.
<b>Health &amp; Safety</b>	Users will need to ensure that they have read, agreed and signed the Schools Health & Safety policy.
<b>Risk Assessments</b>	As part of your block booking or special event, you are required to submit an activity risk assessment. Please ensure you submit an up-to-date Risk Assessment, stating measures to adhere e.g. participant ratio. For further information please visit <a href="http://www.hseni.gov.uk/articles/risk-assessment">www.hseni.gov.uk/articles/risk-assessment</a> . <a href="https://www.hse.gov.uk/coronavirus/working-safely/risk-assessment.htm">https://www.hse.gov.uk/coronavirus/working-safely/risk-assessment.htm</a>
<b>Coaching Qualifications</b>	If tuition/instruction is given throughout the booking, you will be required to produce a recognised coaching qualification.
<b>Fire Evacuation</b>	Communicate basic fire safety information to the group at the commencement of each session as provided by Coleraine Grammar school. Ensure all group members are accounted for at assembly point following an evacuation. Please let us know if you, a member or members of your group have a disability or special needs which may affect your/their ability to evacuate the premises. This can be done by informing the Estates Manager on your arrival.

**PLEASE ENSURE YOU HAVE READ THIS SECTION THOROUGHLY**

	Yes	No	Checked by Staff
I have submitted a copy of my group, club or organisations public liability insurance.			
I have provided a risk assessment specific to your hiring including a protocol to demonstrate how risks are managed and mitigated			
I agree to comply with Governing Body guidelines and to provide all relevant documentation where applicable i.e. Safeguarding Registration Number & Coaching qualifications.			
I agree to provide education to all participants and maintain a register of attendees for each session			
I acknowledge that this is merely an application for use and will not assume the facilities have been booked until I receive a written confirmation.			
<b>Name and address of the person in charge during use:</b> I hereby accept responsibility for the expenses incurred by School for making good all damage to the premises and equipment therein resulting in such use.			
Name	Signature		
Address	Position		
Email	Date		
Postcode	Contact Telephone Number(s)	Day	Evening
		Signature:	
		Date:	

Date Received	Confirmation Sent	Method of Payment	Cost of Booking
		Pay <input type="checkbox"/> Invoice <input type="checkbox"/>	
<b>COVID Risk Assessment (If applicable)</b>	<b>Public Liability Insurance (If applicable)</b>	<b>Qualifications (If applicable)</b>	<b>Child Protection (If applicable)</b>
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<b>Authorised By:</b>	<b>Any other notes/comments</b>		