A picture containing text

Description automatically generatedSt Patrick’s Church Centre

Name ………………………………………………

Event Date ……………………………………………….

Event Times ……………………………………………….

Park Hill Road

Wallington SM6 0RQ

07928 824251

Rates & Fees Information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | Capacity | Chairs | Tables | **Hourly Rate (£)** | Notes |
|  | Big Space | 120 seated | Yes | yes | **£60 occasional**  **£42 regular** |  |
|  | Conference Room | 36 seated | Yes | Yes | **£50 occasional**  **£40 regular** |  |
|  | Woodcote Lounge | 30 seated | Yes | Yes | **£40 occasional**  **£32 regular** |  |
|  | Terrace Room | 20 seated | Yes | Yes | **£35 occasional**  **£28 regular** |  |
|  | Upper Room | 20 seated | Yes | Yes | **£25 occasional**  **£20 regular** |  |
|  | Counselling Room | 3 | Soft | Low style | **£12.50 occasional**  **£10 regular** |  |
|  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | Oven / Hob | Fridge | Crockery | **Hourly Rate (£)** | Notes |
|  | Kitchen | Yes | Yes | Yes | **£15 flat** |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Deposit (returnable if premises left as found) | | |
|  | For individual rooms | **£25** |  |
|  | For parties (30 people+ for 2 hours+ ): £150 first hire, £50 thereafter | **£150** |  |

NB

* One-off party bookings are for a max of 3 hours with a latest finish time of 7pm
* Set up and set-down times to be added to your hire time.
* Please leave each Room as you find it. Clean and tidy and all rubbish removed.   
  If not, deductions will be made from your deposit.
* If premises left unclean - Any cleaning required - £20/hour
* Any rubbish left for removal - £90

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Booking Form

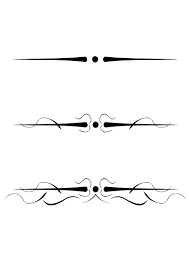
|  |  |  |  |
| --- | --- | --- | --- |
|  | Name of Organiser / Hirer | Organisation (if applicable) | |
|  | Address | | |
|  | Mobile number | Email address | |
|  | Purpose of Hire | | |
|  | NB For party bookings a (refundable) deposit of £150.00 is required with your Booking Form | | |
|  | For Child’s party please state age of child: | | Number expected to attend |
|  | Date of Event | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | ***Select a room for your activity √*** | ***Hire***  ***Day/Date*** | ***Start Time -***  ***End Time*** | ***Number of Hours*** | ***Hourly Rate (£)*** | ***Total Cost (£)*** |
|  | Big Space |  |  |  |  |  |
|  | Conference Room |  |  |  |  |  |
|  | Woodcote Lounge |  |  |  |  |  |
|  | Terrace Room |  |  |  |  |  |
|  | Upper Room |  |  |  |  |  |
|  | Counselling Room |  |  |  |  |  |
|  | Kitchen |  |  |  |  |  |
|  |  |  |  |  |  |  |

|  |  |
| --- | --- |
|  | **Total Cost of your Hire** £ ================= |

|  |  |
| --- | --- |
|  | Full payment must be received one month prior to the event,  our bank details are:  Bank CAF / St Patrick’s Church  a/c 00026638  sort code 40 52 40  Please quote reference |

|  |  |
| --- | --- |
|  | Cancellation in writing/email only – please note charges may apply (see T&Cs)  St Patrick’s PCC hold and process your personal data for the purpose of communicating with you regarding bookings at our Centre. You can withdraw or change your consent at any time by contacting the Church Office via email at: office@stpats.org.uk |



*For Regular Hirers please see overleaf →*

*For Regular Hirers only*

**I have read and agree to the terms & conditions of this booking at St Patrick’s Centre, and I confirm that I have public liability insurance cover for the activity planned.**

Hirer Signed: ………………………………………………………………… Date: ………………………………………

Position *(if group or corporate hire)* ………………………………………………………………………………

**I agree to abide by appropriate safeguarding procedures. I understand that my booking agreement may be terminated in the event of my failing to comply with these procedures.**

Included within this, I have read:

* **“The Parish Safeguarding Policy promoting a Safer Church”**
* **“The Parish Policy for Responding to Domestic Abuse”**
* **“The Code of Safer Working Practice”**
* **“Keeping Safe” – especially pp.8-17**

I confirm that I have public liability insurance.

Hirer Signed: ………………………………………………………………… Date: ………………………………………

Position *(if group or corporate hire)* ………………………………………………………………………………

**In addition**

* **I confirm that my activity does not require OFSTED Registration.**
* **I confirm that where relevant all eligible leaders have been DBS checked.**

Hirer Signed: ………………………………………………………………… Date: ………………………………………

Position *(if group or corporate hire)*……………………………………………………………...………....…………