

Executive Head Teacher: Mrs G Humphriss BA Hons, QTS, PGCE, NPQH

Broad Street Stratford-upon-Avon Warwickshire CV37 6HN Telephone: 01789 293201 Fax: 01789 262493 Email: admin2042@welearn365.com Website: www.stratfordprimary.co.uk

Stratford Primary School - Application for Hire of School Premises Out of School Hours

Part 1 - HIRER (Please complete in block letters)

Name of Hirer/Person accepting overall responsibility for the activity:

Name of Organisation:

Name and Address for Invoice:

Telephone No:

Part 2 - HIRING DETAILS (Please tick appropriate box)

□ EITHER:	Single Hiring:
	Date:
	Start Time:
	End Time:
□ OR:	Multiple Hiring:
	Dates required:
	Start Times:
	End Times:
	Total No.of days hired:











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Part 3 - ROOMS TO BE HIRED

Room required (classroom/hall):			
Purpose of hire (social/training/sale):		Approx. numbers	
Participants: all children? Y/N	If yes state ages:	All adults/mixed: Y/N	
Will chairs be required? Y/N	If so how many? (Caretaker time chargeable): Y/N		
Piano required? (if available) Y/N	Will a charge be made to parti	cipants?: Y/N	
Are public to be admitted? Y/N	The charge is for? (subs/fundra	ising/profit/fees) Sub/Fees	

Part 4 - GROUNDS AND EXTERNAL AREAS - Taking vehicles on site is strictly forbidden. Any damage will be charged to hirer including clearing and disposing of litter left behind.

Hard surfaces (playground):

- playgrounds are not designed for car parking.

Nature of use (sports/sale/fete):

Approx. setting and clearing up times to be added:

Will access be required the next day for clearing up purposes? Y/N

Time? (to be agreed):

Part 5 - CRIMINAL RECORD BUREAU CHECK

Applies if your use involves children and/or vulnerable adults and is **not** a family occasion/event, e.g birthday party

Name of Organiser-	DBS Certificate no.
Name of staff/helpers	DBS Certificate no.
Name of staff/helpers	DBS Certificate no.
Name of staff/helpers	DBS Certificate no.
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If more people involved please provide a separate list attached to this application.











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HEALTH AND SAFETY - There is a joint responsibility on the school and the hirer to ensure that health and safety requirements are understood. Hirers should ensure that they have adequate risk assessments in place and that they are familiar with the fire evacuation procedures.

PLEASE READ AND SIGN BOTH DECLARATIONS AT PART 6 AND 7 OVERLEAF AND PASS FORM TO THE SCHOOL OFFICE. *Forms received without signatures will be returned*.

Part 6 - INSURANCE COVER

To comply with the Terms and Conditions:

I hereby indemnify Stratford Primary School for any claims made against the School and also for any claims of the School in respect of damage to its property arising from its use during my hire.

(a) I maintain a Public Liability Insurance Policy the details of which are as follows:

Policy Number: _____ Expiry Date: _____ Indemnity Limit _____

Name and Address of Insurance Company:

Sign _____ Date _____

If the letting is to incorporate any kind of specialist service, such as offering holistic therapies or activities that require professional competence in the instructor, such as a keep fit class or karate training, then the hirer is responsible for maintaining their own professional indemnity insurance.











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Part 7 - DECLARATION (Please read before signing)

I have received a copy of the Terms and Conditions for the Hiring of Educational Premises and Grounds Out of Normal Hours and agree to be bound by them. I also agree to comply with all obligations imposed by statute, regulation, bylaw, and order or licensing relevant to the use by me of the premises and grounds. In particular, and without prejudice to the generality of the foregoing, I agree to observe the requirements of any entertainment, performance and music and alcohol Licences, Copyrights, Designs and Patents and to obtain, and produce on demand when requested to do so, all licences necessary and with particular regard to the requirements of the Licensing Act 2003.

I certify that all adults working with any children or vulnerable adults have had the necessary CRB checks as per certificate numbers provided and I agree to pay the charges due as required, and hereby certify that the premises and grounds will be used for the purpose stated.

I have read and understood Part 6 - Insurance Cover and:

I attach official evidence of my Public Liability Insurance Policy

I attach a completed Risk Assessment

l am over 18 years of age.

Sign _

Date _____











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It is confirmed that the accommodation required can be made available on the date(s) requested, that the Head of School has been informed, that the hiring has been approved by or on behalf of the Governors and that the applicant has been informed accordingly.		
Date:		
Business Manager/Head of School		
The caretaker on duty for this hiring will be:		
Emergency contact number:		











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COMMUNITY ACADEMIES TRUST













