

APPLICATION FOR USE OF A COUNCIL RESERVE - AUSKICK

AUSKICK NAME: _____

COORDINATOR: _____

ADDRESS: _____

SUBURB: _____ POST CODE: _____

TELEPHONE: _____ FAX: _____

EMAIL: _____

RESERVE: _____

DAY (S): _____ TIME: _____ to _____

START DATE: _____ FINISH DATE: _____

ESTMATED NO. OF PEOPLE ATTENDING: _____

PUBLIC TOILETS REQUIRED: *Not available at all reserves Yes No

COUNCIL KEYS HELD BY GROUP: _____

I have read the "Conditions for Casual Use of Council Reserves" and agree to be bound thereby.

The hirer indemnifies Council and holds Council harmless from and against all actions, costs, claims, charges, expenses and damages whatsoever which may be brought or made or claimed against Council arising out of or in relation to the negligent acts of the hirer arising from the use/hire/lease of the facility in question.

Dated this _____ day of _____ 20 _____

Name _____ Signature _____

This form should be completed and returned to Recreation Services, City of Monash,
PO Box 1, Glen Waverley 3150 or by facsimile 9518 3444 or email recreation@monash.vic.gov.au.
