

EVENT BOOKING FORM FOR THE RODNEY GREEN CENTENNIAL EVENT CENTRE, THE CHAPMAN PAVILION PETTIGREW LOUNGE 1, THE CHAPMAN PAVILION CORPORATE LOUNGE 2, THE GRAEME LOWE STAND CORPORATE LOUNGE 1, THE GRAEME LOWE STAND CORPORATE LOUNGE 2 AND ANCILLARY FACILITIES.

Please **sign** and return the completed form by one of the following methods: email to bookit@napier.govt.nz; deliver in person to Napier City Council, Customer Service Centre, 215 Hastings Street, Napier; or post to Bookings Coordinator – Parks, Reserves, Sportsgrounds, Napier City Council Private Bag 6010, Napier 4142.

| Today's Date:/ | | | | | |
|---|---|--|--|--|--|
| Event Details | | | | | |
| Name of Event: | | | | | |
| Main purpose of Event: | | | | | |
| Setting up Date: | Setting up Time: | | | | |
| Event Start Date: | Event Start Time: | | | | |
| Event Finish Date: | Event Finish Time: | | | | |
| Pack Out Complete By Date: | Pack Out Complete By Time: | | | | |
| Local Sports Bodies – Seasonal Hire Sports Bodies, Not for Profit and Local Community Benefit Commercial Comments: | . · · · · · · · · · · · · · · · · · · · | | | | |
| Estimated number of people attending: | _ | | | | |
| Will there be an admission charge? Yes ☐ No | if yes, how much will it be? | | | | |
| Contact Details | | | | | |
| Name of Club/Group/Organisation: | | | | | |
| Name of Contact Person: | | | | | |
| Contact Address: | | | | | |
| | Postcode: | | | | |
| Telephone Number: (day) | (mobile) | | | | |
| Email: | Fax: | | | | |

Areas and Service Requirements

Sound

Structural

AREAS: (please tick) **Rodney Green Centennial Event Centre** Main Hall Kitchen (Please include Caterer's details) Caterer's details Dining Room Male Changing Room Female Changing Room Meeting Room 1 (small) **Chapman Pavilion Pettigrew Lounge 1 Chapman Pavilion Corporate Lounge 2 Graeme Lowe Stand Corporate Lounge 1** Graeme Lowe Stand Corporate Lounge 2 **Graeme Lowe Stand Kitchen** (Please include Caterer's details) Caterer's details _ **TOILETS:** (please tick) Serviced* **Rodney Green Centennial Event Centre** Required Main Hall Toilets - Male Yes No Yes No Main Hall Toilets - Female Yes No Yes No Foyer Toilets - Male Yes No Yes No Foyer Toilets - Female Yes No Yes No Chapman Pavilion Pettigrew Lounge 1 Yes No Yes No **Chapman Pavilion Corporate Lounge 2** Yes No No Yes **Graeme Lowe Stand Corporate Lounge 1** No No Yes Yes **Graeme Lowe Stand Corporate Lounge 2** Yes 📮 No No Yes **OTHER REQUIREMENTS:** (please tick) **Basketball Hoops Retracted** Number: Plastic Chairs (100 available) **Event Liquor Licence Event Food Vending** Reserved Car Parking Dates required: _____to:____ Notice Board (Main car park entrance) Graeme Lowe Stand Lounges 1 and 2 (Extras) Number: Tables 26 available Chairs 260 available Number:_____ **HIRER'S EQUIPMENT AND SETUP:** (please tick) Floor Layout Plan Yes \square No Please attach a copy Yes 📮 Electrical No Specify_____ No Specify_____ Decoration Yes

Yes

Yes

Specify

Specify

No

No

^{*}Servicing/cleaning during event - (hours to be confirmed by Custodian the following day and invoiced accordingly)

HIRER'S EVACUATION REQUIREMENTS:

| Venue | | | mum <i>A</i> at any | | | | Number of nding the | |
|--|----------------|-------------------------------|------------------------|--------------|---------------------------------|-------------------------|-------------------------|------------|
| Rodney Green Centennial Events Centre | | | | | | | | |
| Chapman Pavilion Pettigrew Lounge 1 | | | | | | | | |
| Chapman Pavilion Corporate Lounge 2 | | | | | | | | |
| Graeme Lowe Stand Corporate Lounge 1 | | | | | | | | |
| Graeme Lowe Stand Corporate Lounge 2 | | | | | | | | |
| | | | | | | | | |
| PUBLIC LIABILITY INSURANCE: (please tick) | | | | | | | | |
| Hirer's own Public Liability Insurance Napier City Council's Public Liability Insurance | ce Co | ver (H | Iall Hir | er's Ir | isurance | , | tach certifi | cate) |
| DISCLOSURE: | | | | | | | | |
| I, the above mentioned hirer, acknowledge Hire for the Rodney Green Centennial Ever Chapman Pavilion Corporate Lounge 2, tl Lowe Stand Corporate Lounge 2 and ancill | nts C ne Gr | entre aeme | , the C Lowe | hapm Stan | an Pav d Corp | ilion Pett orate Lou | igrew Lou unge 1, th | nge 1, the |
| Name:(Please print) | | Signature: | | | Hirer or Authorised Agent | | | |
| Date:/ | | | | | | | | |
| | | | | | | | | |
| OFFICE USE ONLY: | | | | | | | | |
| OFFICE USE ONLY: Available: Yes No Approved: | : | Yes 🗆 | l No | | Con | nfirmed: | Yes 🖵 | No 🗖 |
| | : | Yes 🗆 | l No | | Co r Signed | ofirmed: | Yes 🗖 | No 🗖 |
| | : | Yes 🗆 | l No | | | nfirmed: | Yes 🗖 | No 🗆 |
| Available: Yes No No Approved: | : | Yes 🗆 | l No | | | ofirmed: | Yes 🗖 | No 🗆 |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: | cc | Yes C | l No | | Signed | | Yes 🗖 | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant | | | | : | Signed Nun | nber: | | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant Floor Attendant/s | CC | | User | | Signed Nun | nber: | | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant Floor Attendant/s | CC CC | | User User | | Signed Nun | nber: | | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant Floor Attendant/s Evacuation Co-ordinator N | CC CC | 0 | User User | | Signed Nun Nun | nber: | | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant Floor Attendant/s Evacuation Co-ordinator Please tick when completed Deposit/Bond - Invoiced Deposit/Bond - Paid | cc cc cc | Date | User User User | | Signed Nun Nun | nber: | \$ | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant Floor Attendant/s Evacuation Co-ordinator Please tick when completed Deposit/Bond - Invoiced Deposit/Bond - Paid Balance of Account - Invoiced | CC CC CC | Date | User User User | 0 | Signed Nun Nun No: | nber: | \$ | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant No Floor Attendant No Evacuation Co-ordinator No Please tick when completed Deposit/Bond - Invoiced Deposit/Bond - Paid Balance of Account - Invoiced Balance of A/c Paid/Bond Refunded | cc cc cc | Date Date Date Date | User User User | | Nun Nun No: No: No: | nber: | \$ | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant No Floor Attendant/s Evacuation Co-ordinator No Please tick when completed Deposit/Bond - Invoiced Deposit/Bond - Paid Balance of Account - Invoiced Balance of A/c Paid/Bond Refunded Floor Plan Received/Approved | cc cc cc | Date Date Date Date | User User User | | Nun Nun No: No: No: | nber: | \$ | |
| Available: Yes No Approved: Restrictions/Conditions: | cc cc | Date Date Date Date Date | User User User | | Nun Nun No: No: No: | nber: | \$ \$ \$ | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant Note of the senior Floor Attendant Note of Floor Floo | cc cc | Date Date Date Date Date | User User User | | Nun No: No: No: | nber: nber: | \$ \$ \$ | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant Floor Attendant/s Evacuation Co-ordinator Please tick when completed Deposit/Bond - Invoiced Deposit/Bond - Paid Balance of Account - Invoiced Balance of A/c Paid/Bond Refunded Floor Plan Received/Approved Projects Events List Keys and/or Swipe cards issued Keys and/or Swipe cards returned | cc | Date Date Date Date Date | User User User | | Nun No: No: No: | nber: nber: | \$ \$ \$ | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant Floor Attendant/s Evacuation Co-ordinator Please tick when completed Deposit/Bond - Invoiced Deposit/Bond - Paid Balance of Account - Invoiced Balance of A/c Paid/Bond Refunded Floor Plan Received/Approved Projects Events List Keys and/or Swipe cards issued Keys and/or Swipe cards returned Alarm Monitoring Services notified | cc cc cc | Date Date Date Date Date Date | User User User | | Nun No: No: No: Key: Key: | nber: nber: | \$ \$ \$ | |
| Available: Yes No Approved: Restrictions/Conditions: Evacuation requirements: Senior Floor Attendant Floor Attendant/s Evacuation Co-ordinator Please tick when completed Deposit/Bond - Invoiced Deposit/Bond - Paid Balance of Account - Invoiced Balance of A/c Paid/Bond Refunded Floor Plan Received/Approved Projects Events List Keys and/or Swipe cards issued Keys and/or Swipe cards returned | cc | Date Date Date Date Date Date | User User User | | Nun No: No: No: Key: Key: | nber: nber: | \$ \$ \$ | |