

SPORTSGROUND BOOKING APPLICATION FORM

Organisation Name: _____

Registered Billing Address: _____

Club Contact Name: _____ Telephone No.: _____

Email Address: _____ Mobile No.: _____

Name of Oval, Court or Sporting Facility	Day	Start Date & Start Time	End Date & End Time	Please specify any dates not required e.g. School Holidays	Type of Hire: e.g. Training, Grading, Clinics, Schools or Other	No. Of Participants

Applicants Signature: _____

Date: _____