

APPLICATION FOR USE OF CORAL STREET ART SPACE



CONTACT DETAILS		
Name / Contact Person/s:		Date: (of Application)
		/
Organisation Name: (if Applicable)		Email:
Telephone: (Day)		Mobile:
Postal Address:		
NOTE: This is a request for use and not a confirmation of a booking.		
HIRE PERIOD	01 11	E
Date/s requested: One Off occasion? Y / N	Start time:	Finish time:
Repeated Hire? Y / N		supancy of the space, including set up-pack up nas Security patrols to advise and you will be required
If repeated how often? to exit the building upon request)		
PURPOSE OF HIRE		
Please tick: Event Workshop Meeting		
Provide a brief description of your proposed Event/ meeting/ workshop and how it aligns with the vision of Coral Street Art Space.		
Number of expected guests / participants:		
62 max as per building code.		
Other special conditions / comments:		
If you wish to provide any support or other relevant information please attach to this document.		
Have you included an attachment? Y/ N		
SIGNATURE (must be over 18 years): DATE/		

Please return via:

Post: PO BOX 11

VICTOR HARBOR SA 5211

PHONE: (08) 8551 0500

localgov@victor.sa.gov.au E-mail:

Office Use only:

File Number: **\$CC\$17.92.012**