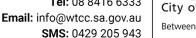
Lockleys Community Room Information for high risk bookings (Schedule D)

Civic Centre 165 Sir Donald Bradman Drive Hilton, SA 5033 **Tel:** 08 8416 6333



Web: westtorrens.sa.gov.au



Your event or function has been assessed to be high risk. For this event to be considered, you will need to agree to the additional high risk terms and conditions.

1. Security

- a. The hirer must take precautions or make arrangements to prevent or restrict unwelcome guests (including gate crashers) to the hired event.
- b. The hirer is responsible to shut down the function and secure the building if the hirer(s) lose control of the function or of those in attendance. You should arrange for guests to vacate the venue. The capacity of the hall must not be exceeded and the hirer is responsible for all people attending the venue, whether internally or externally to. It is the hirer's responsibility to contact SA Police immediately in the event of any disturbance.
- c. If the hirer fails to take appropriate measures to control those in attendance (guests or gate crashers) and Council's property is damaged or mistreated the hirer will incur the costs of damage or cleaning costs to the Facility for failing to provide a safe environment and limit misuses/damage to council property.
- d. Council will invoice the additional security guard fee on approval of your application.
- e. Council has the authority to close any function if any parts of the conditions are breached.

2. Bond

a. Bond payable for high risk events will be \$1,000.

3. Alcohol

- a. Alcohol may be approved for this booking but it will be the organiser's responsibility to ensure that no person under the age of 18 is consuming alcohol.
- b. The use of glassware will be decided on a case by case basis. If glass is not permitted, all drinks must be served supplied in cans, casks or plastic cups.

4. Declaration

I understand the information supplied to me as listed above. I understand my booking is not approved until such time I receive confirmation.

Such time i receive commination.	
Print full name:	
Signature:	Date:
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Please sign and return this form with your application.	
Office use only	
☐Glassware will be permitted	☐Glassware won't be permitted