

Pt Chevalier Community Centre Inc.
Te Whare Tāpere Manatōpu Ō Point Chevalier
REGULAR HIRERS AGREEMENT

Hirer's Name: (or Group Contact Person)

Correspondence Address:

Phone: Mobile: Fax:

Email:

I, the undersigned have read and understood the "Conditions of Hire for the Pt Chevalier Community Centre Inc." AND agree to abide by all of them.

.....
Hirers Signature

.....
Date

.....
Signed on behalf of Pt Chevalier Community Centre Inc.

.....
Date

The key, alarm code & instructions, where applicable, will be issued once full bond payment is received. Please note the key and alarm code issued to each person is confidential and is the responsibility of the contact person listed on this agreement.

Payment schedule will be by invoice 20th of month unless other arrangements are made with Co-ordinator.

Additional Notes:

Office use:			
Bond Amount: \$50	Date Paid: _____	Receipt No: _____	
Key Issued?: Yes / No	Key # Issued: _____	Date Issued: _____	
Alarm Code Issued: _____	Security Password Given: _____		
Bond Refunded in Full Yes/No	Date Refunded _____	Chq # _____	Amount \$ _____
If not, reason: _____			
Key Returned Yes/No	Date key returned _____		