**Room Booking Checklist Lazenby Hall/Annexe**

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| **U s e r D e t a i l s** |
| Booking/Function Title: |  |
| Venue |  | Date |  |
| Organisation Name: |  |
| ABN ( If applicable ): |  |
| Contact Person Name:  |  |
| Contact Person Phone Number: |  | Email Address: |  |
| Organisation Address: |  |
| Organisation Email Address: |  |
| Organisation Phone Number:  |  | Fax Number: |  |
| \*Venue Walk-through Requested | Yes/No | Date & Time |  |
| Time (Bump In) |  | Time (Bump Out) |  |
| Time Performance Starts |  | Time Performance Finishes |  |
| Breaks in the Performance (times) |  |  |  |
| Description of Organisation and activities it conducts and/or services it provides: |
| **U s e r R e q u i r e m e n t s**  |
| Please indicate which seating arrangement you require. | □ Lazenby Hall Half Seating (Capacity 572)□ Lazenby Hall Full Seating (Capacity 850)□ Lazenby Hall – Flat Floor with Stairs□ Piano Large (not located on stage area)□ Piano small ( located on stage area)**Please see attached floor plan and sketch position of trestle tables required** **for Annexe/Foyer area.**  |
| What types of Activity please indicate? | **UNE:** Core Teaching (Lectures, Tutorials, Exams)  Non Core Teaching (Conferences, Seminar) **Other:** Community (Non Profit Organisations, Community Groups, Schools) Commercial (Musical Society, Travelling Performers)  |

**\*If you have not used venue previously a walk-through of the venue is compulsory prior to the event.**

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| **U s e r R e q u i r e m e n t s c o n t i n u e d** |
| Indicate what type of furniture and or equipment required: | □ Lectern□ Urns □ Dressing Rooms □ Wheelchair Access□ Directional Signage (security) | □ Tables (Amount\_\_\_\_)□ Chairs (Amount\_\_\_\_)□ Kitchen □ Stage□ Fire Isolation □ lift to stage  | □ Lighting (own technician must be provided)🞰 □ Sound Desks (own technician must be provided) |
| Please indicate the time of the day access is required: | Set Up Time | Rehearsal Times | Actual Performance Times |
| Meal Breaks | Intermission | Other |
| Do you have any additional specific requirements which are noted in general conditions of hire: |

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| **R i s k A s s e s s m e n t F o r m** |
| This section **MUST** be completed by the user to complete registration.  |
| List the type and levels of insurance held by your organisation & provide a copy of the insurance papers (refer to page 7, section 10.1 of Conditions of Hire (External): | Insurer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Provide total numbers of people attending including all professionals, performers, presenters, theatre staff as well as anticipated audience numbers | Attendees: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Total: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Does the activity involve activities that are considered high risk in nature, such as the use of a naked flame, or smoke generator? |  |
| Have you or do you intend to apply to serve or supply alcohol? |  |
| Do any of your participants have a disability? If so, will they need assistance? |  |
| List the type and nature of equipment involved (e.g. stage props, cords, etc)  |  |

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| **A g r e e m e n t** |
| I/We understand and agree to abide by the Terms and conditions contained within the Conditions of Hire and Acknowledge that I/We have received this documentation.  |
| Name: | Signature: | Date: \_ \_ / \_ \_ / \_ \_ \_ \_ |

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| **Facilities Management Office Use** |
| University Venues hire associated Cost Estimates per day.  | □ $480 Lazenby Hall & AnnexeX\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ $250 Madgwick Hall & Lecture Theatres X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ □ $120 Cleaning X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ $500 Grand Piano LargeX\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ $250 Grand Piano SmallX\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ $25 per hour UNE Campus other Venues X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ $110 CustodiansX\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ AV Technical Theatre Staff Macsound. Weekdays $198 first 3 hours & after first 3 hours $66 per hourX\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | □ $240 (50%) Lazenby Hall & Annexe X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ $125 (50%) Madgwick Hall & Lecture Theatres X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ $120 Isolation Fee X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ $250 (50%) Grand Piano LargeX\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ $125 (50%) Grand Piano SmallX\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ $100 per day UNE Campus other Venues X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ Other (setup etc.)X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ AV Technical Theatre Staff Macsound. Saturday rate $231 first 3 hours & after first 3 hours $77 per hour. □ Sunday $297 first 3 hours & after first 3 hours $99 per hourX\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Total Costs** |  |  |  |
| **Services** | **Work Request:** |  | **Date Information Sent Out:** |
|  | □ Full Seating 850□ default seating 572 (tiered 476, Gallery 96 seat) □ Annexe □ Baby Grand Piano stage area□ Grand Piano flat floor area□ Disabled lift required□ Fire Isolation. Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | □ AV Technical Theatre Staff. Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ □ Insurance Provide□ Security notified for access. Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ Venue walk through requested. Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_□ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Concert Steinway Booking Form**

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| **U s e r I n f o r m a t i o n** |
| Organisation Name: |  |
| ABN ( If applicable ): |  |
| Contact Person Name:  |  |
| Contact Person Phone Number: |  | Email Address: |  |
| Pianists Name |  |
| Which Piano is required? |  Large Steinway |  Small Steinway |

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| **E v e n t I n f o r m a t i o n** |
| Name of Event: |  |
| Dates of Event: |  |
| Times the Piano will be used: |  |
| Explain if other: |
| B i l l i n g I n f o r m a t i o n  |
| **If damage occurs to the piano(s) during users user, Facilities Management Services will charge the user the full amount of necessary repairs.** |
| On Campus Department’s Cost Code |  |
| Off Campus Organisation’s Billing Address |  |
| Billing Contact Name: |  |
| Billing Contact Number: |  | Billing Email Address or Fax |  |
| Please provide any supporting comments or any special considerations in the following space: |

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