## BMCA – Queens Community Centre, Turner Crescent, Croydon CR0 2NP - BOOKING CONFIRMATION AND AGREEMENT

Email: info@queenscommunityhall.co.uk

Tel: 07784 908 960

Full name of Group -Organisation Please print										
Address of Group										
-Organisation Please										
print										
Post Code				Ema	il					
Phone						Mobile				
Invoice nam	ne ai	nd address	(if different from	Na	me					
above)										
Address										
Phone				E	mail					
I/ we wish t	o Hi	i <b>re:</b> Plea	se see <b>Bensham Mar</b>	or Co	ommu	nity Assoc	iation R	ules of l	Hire	
Day/Date Time			Brief description of activity/service you will be providing						Name of activity	
				•						
									No. of people	
									expected	
									opootos	
								on hald in		
Full name of person respo			onsible for niring space			Position held in organisation				
								organi	Sation	
- "	•					,				
Full name of person responsible for managing the activity/service that you will be providing at										
Queens Community Centre										
	_			1						
Phone Number Email										
Date/s and	Tim	e/s when s	ession manager can	do a	Buildi	ng Inducti	on , and	or coll	ect a key	

Charitable status?	Yes	No		BMCA Member?			No		
If Charitable Status is No; please provide status, i.e., PCT, Council, Social Enterprise, Private Business,									
etc if applicable.									
*Before returning this form - Please contact us to confirm the availability of the space that you wish to									
book									

a) you have paid BMCA for the booking, **or**, b) you have received a letter, or email, of confirmation from BMCA. Cheques should be made payable to Bensham Manor Community Association & must be received at least 7 days before the date booked.

I/We have read, and accept the **Terms and Conditions of Hiring**, as detailed in the attached document: **Bensham Manor Community Association Queens Community Centre Rules of Hire** If you do not have a copy; please request one.

Payment should be sent to or made to: BMCA, Queens Community Centre, Croydon CR0 2NP										
Signed:		Date:								
Note: If yo	ou are returni	ng this form by en	nail – you do no	t need to sign it						
Print nam	ie:									
BMCA - Office use only:										
Date	Date	Added to diary	Date Invoice	Name of	Date Payment	Receipt				
Booking	Confirmed		sent	Hirer	received	issued				
Received						BMCA				
						member				

<sup>\*</sup> You should not assume that your booking is confirmed until, either: