THE APPLETON SCHOOL
LETTINGS FORM 2025-26

APPLICATION TO HIRE SCHOOL PREMISES

THE APPLETON SCHOOL
CROFT ROAD, BENFLEET
ESSEX, SS7 5RN
TEL: 01268 794215
FAX: 01268 759981

The form must be completed by the person responsible for the function and all payments in respect of the hiring

Please complete in BLOCK CAPITALS

Applicant's Name:
Society or Organisation:
Purpose of Hiring:

Day	Date	Month	Year	Accommodation	Time			
Please attach calendar for regular bookings					From		To	

Times must include setting up and clearing away.
Electrical items, stage lights & sound equipment etc will only be available by prior written permission.
These items may incur an additional charge

Facilities Required

200 chairs/20 tables Number of Chairs (Hall) Max. 320 (assembly layout)	
Other	

Estimated No. People to attend per event	
How Many Under 18's	

Will there be:- **Y/N**

Recorded Music	
Live Music	
Dancing by performers/Public	
Theatrical Performance	
Consumption of Alcohol	
A Cinematograph Exhibition	

Is the Function	Private	
	Public	

	Please Circle
Do you have Public Liability Insurance? (copy required) (Conditions of Hire item 13)	**YES/NO**
NO BOOKINGS WILL BE ACCEPTED WITHOUT PUBLIC LIABILITY INSURANCE - Minimum £10,000,000 COVER.	
Attach completed risk assessment? (**Incorporating PUBLISHED COVID - SECURE GUIDANC**E - Copy req'd)	**YES/NO**
Are first aid arrangements covered in your risk assessment?	**YES/NO**
Have you familarised yourselves with the fire evacuation procedures?	**YES/NO**
Have you received and read the school's Conditions of Hire and Child Protection Policy?	**YES/NO**
Does your organisation have its own Child Protection Policy?	**YES/NO**
Applicable to item 22 (Conditions of Hire)	
Are you supplying the relevant instructors for your hire?	**YES/NO**
Swimming Pool Lettings only	
Have you read the schools Swimming Pool Safety Policy?	**YES/NO**
May we give out your details if asked?	**YES/NO**

Disabled access is limited - Please contact us for further information.

Name & address for the invoice to be sent to if different from below

_____

_____

_____

Email: _____

DECLARATION

I on behalf of _____ hereby apply for the use of the accommodation and facilities stated and if my application is approved, I will ensure payment in advance of the charges due. I will also ensure that the conditions of hire/swimming pool procedures, which I have read are complied with. I can confirm I am over 18 years old.

Signature of applicant ..... Date .....

Address _____

_____

_____

Contact Numbers: Home: _____ Mobile _____

Email: _____

A signed copy of this form will be returned within 14 days to confirm booking.

Letting Approved **YES / NO** Signed _____

Date _____

Office use only

Site _____

Finance _____

Admin _____

Provisional Cost of Hire

Calculated on present rates of hire. These are subject to increase w.e.f. September each year.
Charges at the time of hiring will be applicable.

Data protection act - any personal data entered on this form may be held on computer files