

ST LEONARD'S CHURCH, STREATHAM BOOKING REQUEST FORM



Personal Details Name of hirer and

Name of hirer and contact	t details:	
Name		
Organisation		
Email		
Telephone		
Address		
About Your Booking		
Date of requested booking (dd/mm/yyyy)		
Building to be vacant from (time)		
Building to be vacated by		
Total hours requested		
The church will be used f	or (brief des	scription of event):
The following will be requ	ired:	
Use of organ (£50)		
Use of piano (£20)		
Use of Sound System /	PA	
Use of kitchen facilities is crockery / cutlery. (NB: y need to supply your owr coffee, milk and sugar)	ou will	





I confirm that, if there are children attending my event, I have read and my organisation will comply with the St Leonard's Safeguarding Policy

Signed:		
Please return	completed form to office	@stleonard-streatham.org.uk
arrange for yo		now if we can accommodate your event, and to 25% of the total booking fee to be sent to us so that
Thank you, St. Leonard's	Church	
To be filled ou	t by the Office:	
	Deposit of £	paid
	Date booking agreed:	