## POLISH ASSOCIATION in MELBOURNE Inc.

POLANA YOUTH CENTRE, 360 DON ROAD, HEALESVILLE, VIC. 3777

POSTAL ADDRESS: P.O. Box 8012, FERNTREE GULLY VIC 3156 Melways Ref: 278 H7 Fax. 03 9778 3219 email: polana@email.com				
Booking Form and Hire Agreement				
I	Name of Group/Organisation:			
,	Applicant's Name:			
,	Address:			
	Contact Details: (BH) (AH) Email:		Fax:	
(	Commencement Date:	Finish Date:		
ı	Number of participants attending:	Adults:	Children:	
I attach a deposit of \$200 to secure the booking for the above dates. This deposit will become a BOND on arrival, fully refundable within 20 business days of the finish date if there is no property damage and if no cleaning costs are incurred.  AGREEMENT: The payment of the deposit by the hirer constitutes an agreement to hire the campsite.  DEPOSIT: The deposit of \$200 (or 10% of anticipated fee if greater than this) must be enclosed with this application form to secure a booking. The deposit becomes a BOND on arrival.  HIRING CHARGES:				
	Night	Per Day (no ov	vernight accommodation)	
\$15 <b>We</b> \$40	eknights: 5 per adult, \$7.50 per child 3-12 years old ekends: 6 per adult, \$25 per child 3-12 years old 6. Or Sat. only: \$25 per person	Weekdays: \$7.50 per adult	t, \$5.00 per child 3-12 years old.	
<b>Note:</b> Week is from Monday 10.00AM to Friday 2.00PM & weekend is from Friday 6.00PM to Sunday 4.00PM				
to	YMENT: Payment in full is required prior to de 'Polish Association in Melbourne Inc." or proprorated Bendigo Bank BSB 633-000 Accou	aid directly to	Polish Association in Melbourne	
<b>LIABILITY:</b> "Polana Camp" and its agents and employees do not accept liability for loss of property or damage or personal injury arising from the use of the facility.				
<b>CANCELLATION:</b> If more than 60 days before booked date, deposit minus \$25 admin. Fee will be refunded. If less than 60 days, deposit minus \$25 will be refunded if a similar replacement booking is obtained otherwise deposit is forfeited.				

SIGNATURE OF APPLICANT: ...... Date:.....

## PLEASE NOTE THAT NO PETS ARE PERMITTED ON THE CAMP SITE.

Office Use only:

amor are any:				
Deposit Paid \$	Receipt Number:	Date:		
Balance Paid \$	Receipt Number:	Date:		
Full Payment of \$beingoccupants @ \$per head,occupants @ \$ per head andoccupants @ \$per head.  AMOUNT OF BOND TO BE REFUNDED: \$APPROVED:				