

**HORNSEA SCHOOL 3G
APPROVED SCHOOL USER SCHEME
APPLICATION/BOOKING FORM**

1. Booking Details

- Name of Club/User Group:.....

Which of the following categories does your Club/User Group fall into?

- Voluntary/non profit making formal group
- Pay and Play/informal group
- Business/sole trader (This includes party organisers, sports academies, dance schools etc)
yes no

If you have answered Yes are you ERMOS registered
yes no

Facilities you would like to use?

- 3G Pitch please state what sections 1/4 1/2 Full pitch
- Changing Facilities for outdoor events
- Sports Hall & Changing Rooms
- Gymnasium & Changing Rooms
- Outdoor Pitch + Car Park- per 2 hour session
- Mini soccer pitch+ Car park- per 1 hour session
- Tennis Court
- Netball Court
- Sixth form common room

(Please tick the facility you require).

Purpose/activity for which venue

required?..... (i.e. Football match)

(If using a pitch please specify whether this is for matches or training)

- Age range of participants?.....
Estimated number of people attending each Session?.....
- Is this activity being run as part of a business or to make a profit?
Yes No
- Is this a fund raising activity?
Yes No
- If answered YES to whom will any funds raised be donated?
.....
.....

- Name of a suitably qualified person who will be responsible for the participants and facilities during the Session (i.e. normally person making the booking).....
- Day(s) of week booking required.....
- Frequency(E.g. Weekly, Fortnightly, Monthly, Single one-off,)
- Booking start date.....
- Finish date.....

Times school/pitch required for letting.

From:.....a.m./p.m. To:..... a.m./p.m.

(Definite times must be stated)

Is your group registered with **ERCVYS**? (East Riding (council for) Voluntary Youth Services)

Yes No

If you have answered YES please provide **ERCVYS registration number** here

And go straight to section 7 on page 4.

Has your group/club achieved **ERCAS** Level 1 or above? (East Riding Club Accreditation Scheme)

Yes No

If you have answered YES please provide **ERCAS registration number** here

and go straight to section 7 on page 4.

2. Health and Safety Issues

Please confirm that your club/group has the following in place at any venue used:
(**Templates are available on request**).

- Access to a telephone
- Guidelines for dealing with an accident/incident
- Accident / incident report forms
- A completed **annual** risk assessment, with action plan
- Health and Safety Checklists (prior to sessions)

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

3. First Aid

- Please confirm that the club/group has access to a first aid kit at all times:
Yes No

4. Safeguarding Child Protection/ Vulnerable Adults

- If you have juniors/vulnerable adults attending sessions on an informal basis, do you have written consent for them to take part?
Yes No

Please state how this information is recorded:

.....

- Do parents leave children at the session? Yes No
- Do all people working and volunteering at a sessions involving children/vulnerable adults have a current Enhanced DBS Check (formerly CRB) or check on the relevant Barred list if engaging in regulated activity,¹ which indicates they pose no risks to the children/vulnerable adults in the club/group Yes No

a) Please provide **DBS certificate numbers** for all people working or volunteering at a session with access to children/vulnerable adults in the space below:

...../...../.....

b) Does your club/group have a system in place to check DBS certificates?
 and process new enhanced/barred list DBS checks for coaches/volunteers?
 Yes No

4a. Activity Qualifications

(NOT ALWAYS APPLICABLE)

E.g. sports coaching, dance, drama, playwork.

- If you are running any formal activity sessions do the leaders of sessions/activities possess an appropriate qualification:
 Yes No
- Please provide the names and qualifications of any coaches at your club who run coaching sessions and ensure you have copies of their relevant up to date coaching certificates.

Name of coach/leader	Qualification and date gained

5. Checklist

I confirm the club/group have in place the following documentation which will be made available, on request, for inspection (Please tick)

- Copy of accident / incident form
- Copy of a health and safety checklist
- Copy of a completed annual risk assessment form / action plan
- Emergency contact details for parents

- Copy of consent forms for children/vulnerable adults (if applicable)
- Copies of coaching/leaders certificates if applicable
- Records of DBS reference numbers if applicable
- Copy of child protection policy/procedure
- Copies of child protection training certificates (if applicable)

7. Declaration

The information provided in this application form is correct to the best of my knowledge and I understand that any incorrect information provided will result in the use of the school facilities/pitches being withdrawn.

ATTACHED IS A COPY OF PUBLIC LIABILITY INSURANCE CERTIFICATE *PLEASE NOTE THAT A VALID INSURANCE CERTIFICATE MUST BE SEEN BEFORE THIS FORM CAN BE PROCESSED.*

Signed:

Print Name.....

Date:.....

Address:.....

Contact No. Daytime.....Mobile.....

E-mail address.....

Preferred Method of Contact: Email Post

Name and contact details of person to be invoiced for the letting if different from above:

Name:

Address:.....

Contact No. Daytime.....Mobile.....

E-mail address.....