

**Application for Member sponsored Use of Clubhouse/Facilities**

To be presented to the committee for approval (committee meetings are normally the last Tuesday of each month) addressed to ‘The Secretary’. I have read and understand the restrictions and requirements.

**Please complete the following:-**

|  |  |  |
| --- | --- | --- |
| Name of requesting TYC Member (responsible for club facilities and cleaning after use) |  |  |
| Date of Club use |  |  |
| Purpose of the event |  |  |
| From what time – until |  |  |
| Number of people (to comply with safety regulations) |  |  |
| Benefit of event to TYC |  |  |
| Club facilities required (upper deck/lower deck/bar/galley) |  |  |
| Names of other TYC members present. Members to be present throughout the function |  |  |
| Recommended minimum donation £100.00 plus £50 deposit for cleaning (returnable if clubhouse cleaned and tidied by 11 a.m. following morning). |  |  |

The TYC Member responsible for requesting the use of the clubhouse must be present at all times during the event.

Uninvited TYC Members have right of access to the clubhouse at any time.

Please note that if the bar is required the Bar Chairman will appoint a bar person which will be an additional charge (depending on duration bar is open). Under the terms of our licence the bar must close at 11p.m.

Payment for club facilities, refundable clean up deposit to be made by cheque payable to Twickenham Yacht Club.

I agree to leave the premises in a condition that the membership would expect otherwise a clean-up fee of £50 may become payable. This work must be completed by **11.00a.m.** the following morning. Once a booking date is approved refund of donation is not possible as date is then held which excludes other applications. Applicant is responsible for guests and the Clubhouse during the event as well as during preparation and when cleaning up afterwards. Twickenham Yacht Club does not accept responsibility for visitors to the premises; this is at their own risk.

The number of guests may be limited at the discretion of the Committee and can depend on the age group of the party.

I confirm that I have read and understand the restrictions and requirements.

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Tel. No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |
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| **Approved on behalf of the General Committee** |  | **Date** |

With effect from 1st April 2014