glob Centre Booking Form

GLO Centre 78 Muir Street MOTHERWELL ML1 1BN

Tel: 01698 263483 **Fax:** 01698 253942

Web: www.theglocentre.co.uk Email: hirings@glo-europe.org

Please retain a copy of this information for your own records.

- 1) All the buildings at the GLO Centre are designated non-smoking areas. The premises are <u>not</u> licensed.
- INSURANCE The GLO Centre has full Public Liability cover for our own buildings and equipment. However, this will NOT cover any accident caused by, or damage to, the hirers own equipment or property. You should therefore check that your own insurance cover will cover you in the event of any incident.
- 3) The hirer assumes responsibility for loss or damage to GLO equipment and fabric, fair wear & tear excepted.
- 4) No food or drink is permitted in the Auditorium.
- 5) There is car parking available at the Centre but spaces cannot be guaranteed. We take no responsibility for any damage caused to vehicles in our car park.
- 6) We will provide a full Health & Safety and Fire Safety briefing to the Responsible Person you have nominated for the group. They will be expected to sign a statement that this has been carried out, that they will ensure the maximum capacity for the room is not exceeded and that they will take reasonable responsibility for their group. A copy of the statement is attached for your information.
- 7) For events out with office hours, attendance by a member of GLO Staff is necessary. There will be a standard charge of £30; for events over 4 hours there will be an additional charge of £7.50 per hour.
- 8) A non-refundable deposit of 25% is required to confirm your booking. (Bookings cancelled within a month of the event may be subject to a 25% cancellation fee.)

Please complete the form and return to: Bookings Co-ordinator

GLO CENTRE FIRE SAFETY and HEALTH & SAFETY

Please retain this information for your own records

Under the Fire (Scotland) Act 2005, ALL persons using these premises have a responsibility to take reasonable care to ensure the premises are safe from harm caused by fire, and to do nothing that will put yourself or others at risk.

You MUST inform one of the 'responsible persons' of anything....which you reasonably consider represents a shortcoming in our Fire Safety Protection arrangements.

- General tour of premises, toilets & facilities, who to contact in case of problems.
- Door Codes, Security Issues & Role of Staff Contact Person.
- Use of Kitchen or Catering provision.
- (only if specifically requested this will be subject to separate Food Safety Hazard Analysis as required)
- Accepts responsibility for supervision of any young people, etc.
- Accepts responsibility for damage or vandalism by the group.
- □ Importance of compliance with reasonable Health & Safety requirements.
- □ Importance of compliance with Fire Action Plan.
- Responsible person to contact Emergency Services as required location of phone.
- Responsibility for compiling register or accounting for attendees in case of Emergency Evacuation.
- □ No Smoking, no naked flames or candles permitted in the premises.
- □ Briefing on Fire Exits & Assembly Point.
- □ Fire Alarm loud continuous ringing.
- Location of Fire Fighting Equipment & awareness of Fire Alarm panel location.

Statement by Responsible Person(s) – who must be present at the event

Name of Group.....

Name of Person responsible on the day:....

Date(s)of Hire.....

Approximate Number in party.....

- I confirm I have received information regarding Fire Safety and Health & Safety with regard to my let at the GLO Centre.
- I will endeavour to ensure all those under my control abide by these requirements.
- In particular, I am aware of the maximum capacity of the room and I understand that I am responsible for providing an accurate register to authorities in event of an Emergency Evacuation of the premises.
- I am also responsible for providing a briefing with regard to Fire Alarm, Exits & Procedures to participants prior to the commencement of the event.

Signed.....On behalf of the GLO

Signed.....On behalf of the organisation

Group / Organisation:	
Purpose of Use:	
Registered Charity number (where applicable):	
Name:	
Address for invoice:	
Tel: Ei	mail:
Name of group leader on the day:	
Date(s) of Hire:	Times:
Time access required before / after event:	
Indicate which room you would like to book:	Indicate what equipment you will require:
Tilsley Auditorium	Screen
Rotunda	Flip Chart
Adjoining Kitchen	Microphone(s)
	Lectern (standing or table)
Smaller Rooms:	Tables
Board Room (upstairs)	
Dorcas Room (downstairs)	glos

Description of your required Layout of Room(s):
please provide a brief description/diagram

Number of seats required:

Number of tables required:

Catering Arrangements

(please give details of your requirements, including timings and number of people)

Other Comments / Requirements

We enclose a deposit of _____

Signed _____

Date _____

