



Jordanstown
the Northern Ireland
school and
centre of excellence
for children
who are deaf or
visually impaired

Education Authority – North Eastern Region

Application for Use of School Facilities

PART A (To be completed by the applicant)

Name and address of applicant:

If you are acting on behalf of a club or organisation, name and address of club or organisation:

Name and address for invoice:

Contact telephone number:

E-mail:

Period of use: __/__/__ to __/__/__

Number of days:

Frequency:

Times of use (Start and finish):

Expected numbers:

Age group:

Details of facilities required (Delete as appropriate)

Multi-purpose hall	–	YES/NO
Changing rooms	–	YES/NO
Classrooms	–	YES/NO
Fitness suite	–	YES/NO
Heating required	–	YES/NO
Outdoor grounds	–	YES/NO
Multi-sensory room	–	YES/NO
Hydrotherapy pool	–	YES/NO
Small meeting room (6 persons)	–	YES/NO
Large meeting room (30 persons)	–	YES/NO
Staff room	–	YES/NO
Soft-play area	–	YES/NO
Dining hall	–	YES/NO

Other (Please specify):

I confirm that I have received, read and agree with the Terms and Conditions of Use of Facilities: YES/NO

I hereby make application for the use of facilities as detailed above:

Signature _____
Applicant

Date _____

On completion of Part A, the applicant should return the form to the school who will complete Part B.

PART B (To be completed by the school and returned to the applicant)

	No. of hours	Cost per hour	Total
Premises			
Equipment			
Caretaking			
Heating			
Net Cost =			
VAT =			
Total Cost =			

PART C (To be completed by school if proposed hire is approved)

I confirm the approval of the Use of Facilities as set out in Part A and B

Signature _____
Principal

Date _____

Completed forms should be forwarded to the relevant Education Authority Region and a copy retained by the School and the Applicant.

PART D (To be completed by Education Authority Region)

Issued/journal transfer (Delete as appropriate)

Invoice Number:

Date: