

WAKEFIELD REGIONAL COUNCIL COMMUNITY BUS HIRE APPLICATION

Organisation: _____

Contact Person: _____

Address: _____

Ph: _____ Email: _____

Proposed hire date/s: _____ Time: _____

Purpose of hire: _____

Estimated distance to be travelled / destination: _____

Driver: (must be a registered volunteer with Council)

Name: _____

Preferred payment option (please tick):

☐ Payment in advance ☐ Payment on day ☐ Payment on invoice

☐ I am aware of the conditions applicable to the hire of the bus and hereby agree to them forming part of this hire agreement (see *Wakefield Regional Council Community Bus Hire Conditions*)

Signature: _____ Date: _____

Office use only

☐ Approved ☐ Declined Cost: _____ Payment received: / / 20

Reason: _____

Signature _____ Date: _____