

Commercial Recreation Activities on Public Open Space Licence Application

Personal Trainers, Boot Camps and Team Building Activities

(OFFICE USE)									
Date Received	<input type="text"/>	6 months	<input type="checkbox"/>	12 months	<input type="checkbox"/>	Approved - Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Invoice Date	<input type="text"/>	Low Use	<input type="checkbox"/>	High Use	<input type="checkbox"/>	Amount	<input type="text"/>		

For further information refer to [Guidelines for Personal Trainers, Bootcamps and Team Building Activities](#) on the Commercial Recreation Activities on Public Open Space page of Council's website.

A1. Applicant

A company can apply for a licence on behalf of one or more employees. A licence is required for each trainer/instructor. The insurance can be in the name of the company, however a cover letter advising that the additional trainer/instructor is an employee will be required. A certificate for Industry Accreditation and First Aid are required to be attached for each additional trainer.

A licence fee applies to each individual instructor.

Company	<input type="text"/>				
ABN	<input type="text"/>				
Name	<input type="text"/>	Surname	<input type="text"/>		
Additional Trainers (individual fees apply for additional trainers)					
2. Name	<input type="text"/>	Surname	<input type="text"/>		
3. Name	<input type="text"/>	Surname	<input type="text"/>		
4. Name	<input type="text"/>	Surname	<input type="text"/>		
Address	<input type="text"/>				
Suburb	<input type="text"/>	State	<input type="text"/>	Post Code	<input type="text"/>
Telephone	<input type="text"/>	Mobile	<input type="text"/>		
Email	<input type="text"/>				

A2. Activity Details

Description of Proposed Activity

A3. Frequency of Use

Licence Option 6 Months (*Issued 1 July & 1 January) 12 Months (*Issued 1 July of every year)

Please note that:

High frequency is more than three (3) days or ten hours per week.

Low frequency is three (3) days or less, or ten hours or less, per week.

*Contact Council to enquire about pro-rata options if licence is required prior to commencement

Day	Session 1 Start/Finish	Session 2 Start/Finish	Session 3 Start/Finish	No. of Attendees	Park/Beach Name (refer to Additional Notes)
Monday	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
Tuesday	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
Wednesday	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
Thursday	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
Friday	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
Saturday	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
Sunday	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>

Additional Notes:

(provide specific details of location within Park / Beach and estimated number of attendees, trainer at each venue or variations to the above matrix etc).

A3. Applicants Declaration

I declare that all the information in this application, checklist and attachments are true and correct. If the information is incomplete the application may be delayed or rejected.

I will also undertake to abide by the licence conditions in the licenced and surrounding areas and will be responsible for all attendees relating to my licence.

I acknowledge that by signing this declaration I have read and understood the Commercial Activities on Public Open Space Policy and confirm that I hold and will keep current the relevant certificates and accreditations to maintain the licence.

*Attached to this application are:

- Industry Accreditation
- Senior First Aid Certificate
- Public Liability Insurance (minimum of \$20,000,000)
- Other – Please Specify

Applicants Name

Applicants Signature (*required) Date

Note: Submission of this application will initiate fees on approval of licence which I agree to pay.