



**BBQ APPLICATION FORM\_CLUBS**

This is your BBQ application form. The form must be filled out in full, providing all the information you have on your proposed event. Please complete a separate form for each event.

Club/Representative Team:			
Person Responsible:			
Surname:		First Name/s:	
Phone Number (AH)		Phone Number (mobile)	
Email Address:			
Dates of BBQ:			
Where will the proposed event take place? (specific description)			
Event time (if applicable):	Start:	Completion:	

BBQ applications must be submitted to Club Glenvale Reception or the General Manager at least seven (7) days prior to your planned event dates.

\_\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name (please print)                      Signature                      Date

Office Use Only		
Date of Event: ____/____/____	Date Approved: ____/____/____ Signature: _____	Club/Representative Team Notified: ____/____/____
Comments:		