**Camp Kookaburra**



**Creating Lifelong Memories**

**ABN: 29099764955**  **138 Darrigan Road, Corop**

**Phone: (03) 54848236**  **0415548332**  **Email: cobboldc@gmail.com**

**SCHOOL BOOKING FORM & HIRE AGREEMENT**

**Name of school: Primary**

**Period of Stay:** From: Thursday rd February – Friday th February 2019

Arrive: \_\_\_\_\_ am/ pm Depart \_\_\_\_\_ am/ pm

**Cost per person (including GST): $ Minimum numbers: 40**

**Deposit:**  A deposit of $ 500 must be returned with this form to secure your booking.

**Details of Group:**  Number of students: \_\_\_\_\_\_\_\_\_\_ Year Level: \_\_\_\_\_\_\_ Number of adults: \_\_\_\_\_\_

(teachers free on ratio 1:10 others charged for food.)

**Day Trip (additional Charge):**  **Echuca**  **Bendigo**  **Kyabram**

**Preferred contact method:**  **Email**  **Phone**

**CONTACT DETAILS:**  **Name**:………………………….Email:………………………………………………

Address:……………………………………Post Code…………………Phone:..........................................

**AGREEMENT:** Deposit paid by the hirer constitutes an agreement to hire the use of the facilities from the campsite**.**

**MINIMUM NUMBERS:** The minimum numbers of campers as arranged with the campsite will be charged.

**PAYMENT:** Full payment is required upon arrival unless otherwise negotiated. If necessary, any additional expenses incurred

(extra campers, breakages etc.) will be invoiced and payment is requested within 7 days.

**LIABILITY:** Camp Kookaburra (campsite) and its agents and employees do not accept liability for loss of property or damage or

personal injury arising from the use of the facilities. **Note**: Camp Kookaburra holds all necessary insurance for public risk and injury, (as per industry and accreditation requirements), however it is strongly advised that all user groups also hold their own insurance coverage.

**CANCELLATION:** Deposit **refunds** will only be given for cancellations made 6 months in advance of the camp date. A cancellation

fee of the stated minimum charge is applicable to the hirer if the booking is cancelled within 90 days of the camp dates. In the event of a cancellation by the campsite the hirer shall be entitled to a full refund of all monies paid.

**PRIVACY ACT**: The campsite gives assurance that any personal information including medical details gathered by the campsite,

or provided by the group leader, will remain confidential and only used for the purposes for which it was collected.

*I have read the information above and the attached 'General Conditions for Hire' and the group*

*and I agree to abide by them. I also acknowledge it is my responsibility to inform the group of*

*these conditions including the first aid arrangements, emergency procedures and the safety brief.*

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_

Position Held: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Deposit enclosed: $ \_\_\_\_\_\_\_\_\_\_

PLEASE RETURN THIS FORM TO [cobboldc@gmail.com](mailto:cobboldc@gmail.com) AND PAY THE DEPOSIT.