



ANNUAL SESSION PASS APPLICATION FORM

Please complete all sections of this form and return to Environmental Services, at the address below. **Or**, you can reply via email.

Please get in touch if you have any queries or would like more information.

Office use only

Cust No.	
Order No.	

APPLICANT CONTACT DETAILS

Name of Organisation	
Name of Applicant	
Address	
Postcode	
E-mail Address	
Telephone Number	
Mobile Number	

BOOKING DETAILS

Nature of Booking / activity	
Recreation Ground/ Park	
Start date	
Day(s) required (day(s) of the week)	
Time(s) Required (during daylight hours ONLY)	
Frequency per week / month	
Number of people per session	
Is there to be a charge for admission?	YES / NO (if yes, please state amount per adult/concessionary)

INSURANCE

£5 million Public Liability Insurance (please provide copy)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Policy number		
Expiry date		
Copy attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No

RISK ASSESSMENT

Copy attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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MUSIC

Do you intend to play music?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Please attach music licence (PRS)		

QUALIFICATIONS

Please list relevant qualifications	
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APPLICATION CERTIFICATION

- I confirm that I have read and understood the Terms and Conditions and agree to abide by them.
- I confirm that I am authorised to complete this form and agree to be responsible for any information provided.
- I understand that this booking will be treated as provisional until I receive confirmation in writing from Chesterfield Borough Council.
- I agree to produce any further details should the council require them before the commencement of the sessions.
- I agree to pay the annual fee

Signature:	Date:
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All information provided will be treated in accordance with the Data Protection Act 2018 and will remain confidential. We will not share your information with third parties. You can view our [privacy notice](#).