|  |  |
| --- | --- |
| V:\Promotional\Logos\VIEW New Logo CD\Standard Versions\BW_Mono\VIEW_Master_logos\VIEW_MONO_BW.jpg | VIEW Event & Personal Residence Event form |

Complete Section A for all upcoming events/activities.

Complete Section B ONLY if planning an event in a private home.

Email this form to [view@thesmithfamily.com.au](mailto:view@thesmithfamily.com.au) one month prior to your event/activity. Complete only one form annually when multiple events are planned in your home – include all proposed dates.

Important notes:

* Insurance Coverage will only relate to the VIEW Club meetings/activities/events. Insurance cover will not extend to non-VIEW activities eg does not cover after meeting lunch, Afternoon tea etc, unless this activity is arranged by VIEW for the purposes of fundraising.
* The above insurance coverage only applies where an Event & Personal Residence Event form has been completed prior to this in home meeting/event/activity.
* All VIEW Club members are reminded that they have a responsibly to ensure that any alcohol is served responsibly, and that the consumption of alcohol is appropriate to the type of event being held.

|  |  |
| --- | --- |
| Club |  |

## ***Section A: Event Details (All events)***

|  |  |
| --- | --- |
| Event/Activity |  |
| Address |  |
| Date/s (do not use dates as 2nd Tues) |  |
| Time |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Estimated Number of attendees: | | | | | |
| Your club |  | Other clubs |  | Non Members |  |

Meeting Type

Club Committee

Hobby/Craft Groups Fundraising

Lunch/Morn/Aft TeaExcursion

Other (Please specify)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Section B: Insurance in Residence

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Host Contact Details** | | | | |
| Name |  | | |
| Email Address |  | Phone |  |

|  |  |  |
| --- | --- | --- |
|  | **COMMENTS** | |
| All Trips Hazards identified and/or removed: (please ensure you complete in full) | | |
| Rugs/Mats |  |  |
| Loose/free wires/cords |  |  |
| Any stairs to be used have secure handrails |  |  |
| Walkways/Pathways/Driveways including lighting |  |  |
| Steps - Chipped/broken/loose |  |  |
| Doors incl sliding glass doors |  |  |
| Slippery Floors |  |  |
| Furniture – low tables, folding chairs |  |  |
| Removal of obstacles, such as rubbish bins, hose reels, gardening equipment and waste materials, etc. |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Completed By:  Home Owner  Program Officer  Other |  | Date |  |