

# Coromandel Community Centre Inc.

Weymouth Oval, 442B Main Road, Coromandel Valley SA 5051

**Tax Invoice/Receipt – NOT FOR PROFIT ORGANISATIONS AND CHILDREN’S PARTIES**

**OFFICE USE ONLY**

**Name:** \_\_\_\_\_

**Date of Use:** \_\_\_\_\_

**Time of Use:** From \_\_\_\_\_ To \_\_\_\_\_

<b><u>RATE</u></b>			<b>“No GST” FRE</b>
Minimum of 3 Hours \$60			
Extra hours .....@ \$20 per hour		\$	
<b>Total:</b>			
<b><u>OPTIONAL USE</u></b>			<b>“No GST” FRE</b>
Piano \$20			
BBQ \$15			
Blind \$15			
AV System \$50			
		\$	
<b><u>RISK MANAGEMENT FEE</u></b> \$15		\$	<b>“No Tax”</b>
<b><u>BOND</u></b> \$100			<b>“No Tax”</b>
Key deposit - \$10			
Piano Bond (only for piano) -\$100			
AV System - \$300			
<b>Total Bond Owing</b>		\$	
<b><u>TOTAL INCLUDING BOND</u></b>	A		
<b><u>LESS BOND DEPOSIT</u></b>		Amount	<b>“No Tax”</b>
Bond Deposit Rec No: _____ Date: _____			
Amount – Minimum \$50 Taken by _____	B	\$-	
<b>MYOB DEP REC &amp; BY WHOM</b>			
<b><u>BALANCE OWING</u></b>	A-B	\$	
<b>Paid in Full</b> ___/___/2015 <b>Receipt Number:</b> _____ <b>Payment taken by</b> _____			

**MYOB DEPOSIT REC & BY WHOM**

**Late additional payments eg blinds Cash Reg. Rct. & Date** \_\_\_\_\_

**MYOB DEPOSIT REC & BY WHOM**

**COMMENTS:**

**Copy given by:**.....

# Coromandel Community Centre Inc.

*"Connect and Contribute to your Community"*

Weymouth Oval, 442B Main Road, Coromandel Valley SA 5051

Phone: (08) 8370 6880 Fax: (08) 8370 4914 Email: [info@coromandelcc.org.au](mailto:info@coromandelcc.org.au)

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ABN: 74 331 433 252



## Application for Not for Profit Organisations and Children's Party

I/We .....

Of .....

Telephone No. .... Mobile .....

Email address.....

Reason for function ... Approximate Numbers attending .....

Liquor will/will not be consumed during the above function.

Hereby apply to use the Coromandel Community Centre

From .....am/pm to .....am/pm on (day).....(date).....

A deposit of \$50 is lodged with this application form (this non-refundable minimum deposit is required within 14 days) **Deposit due date:** .....

The remainder of the Fee and Bond must be paid a minimum of 4 weeks prior to the date, ie. **Balance due date:** .....

**\*Key pick up is between 9:30am and 10:00am on Friday** .....

Signed (must be 18 years or over)..... Date .....

Bond return will be via EFT within 2 weeks of hire.

Account Name: ..... BSB: ..... Account No.: .....

### OFFICE USE ONLY

Card/Key Number .....Blinds Winder & Clips:.....

BBQ Key No:..... Code Issued .....

Premises OK: Yes/NO

BBQ & Gas OK: Yes/No

AV System: Yes/OK

Card/Keys Returned: Yes/No

Initials:.....

Bond and Key Refund \$..... EFT  or Cheque No..... Date .....

Signed: ..... Dated: .....

Comments : .....

.....

