

NEIGHBOURHOOD ACTIVITY APPLICATION FORM:

Free Hall Hire Program

APPLICANT DETAILS			
Primary Contact Person:			
Phone: Email:			
Address:			
Are you a local resident? ☐ Yes ☐ No			
ACTIVITY DETAILS			
Activity Name:			
Brief Description: (What will happen at your activity?)			
Target Participants: (Who is this for?)			
Expected Number of Attendees:			
VENUE & TIMING			
Preferred Hall/Venue:			
Frequency: \square Weekly \square Fortnightly \square Monthly \square Quarterly \square Annually \square One-off event			
Preferred Day/Time:			
Proposed Start Date: Duration:			
ELIGIBILITY CRITERIA			
Community Building Focus How will your activity help local residents connect and build relationships?			
			

2. Accessibility			
☐ Free to attend			
☐ Donations up to \$5 for costs			
How will you ensure your activity is welcoming to all community members?			
3. Community Benefit How will your activity:			
Create opportunities for neighbours to meet?			
Provide space for locals to discuss community ideas/issues?			
Build lasting relationships in your area?			
Provide feedback to Council about your activity, including attendance, topics discussed, and any community issues or ideas that emerge?			
PARTNERSHIP OPPORTUNITY			
Are you interested in signing Council's Community Charter for ongoing partnership and support?			
□ Already done :)			
☐ Yes, I'm interested in learning more			
□ No, just this activity for now□ I'd like to discuss this further			
ADDITIONAL INFORMATION			
Do you have public liability insurance? □ Yes □ No □ Requesting Council coverage			
Previous experience running community activities?			
Any special requirements or equipment needed?			
How did you hear about this program?			

DECLARATION

I confirm that:

hvc@huonvalley.tas.gov.au

- The information provided is accurate
- This activity meets the neighbourhood activity criteria
- I will provide feedback to Council as requested
- I understand this is subject to hall availability and approval

Applicant Signature:	Date:	
FOR OFFICE USE ONLY		
Application received:	Processed by:	
Outcome: \square Approved \square Decline	ed \square More information required	
Notes:		
Enquiries to: Angela or Heather	in Council's Social Resilience Team.	
Submit to: Social Resilience Tea	am Phone: (03) 6264 0300 Email:	