

FUNFAIR/CIRCUS APPLICATION

Please use a separate application form for EACH site required

Before completing this form please read the enclosed "Conditions of Hire"

Please complete ALL sections in BLOCK CAPITALS

Company Name						
Site Required						
Type of Event	Circus / Funfair (Please Specify)					
	MAIN COMPANY CONTACT ON SITE CONTACT (IF DIFFERENT)					
Title						
First Name*						
Surname*						
Address*						
Town*						
County*						
Post Code*						
Daytime Tel. 1*						
Daytime Tel. 2						
Mobile**						
E-Mail						
* This information	is required for ALL contacts.					
** If a mobile num for ALL contacts		time Telephone number, then a r	mobile telephone i	number is require		
ACTIVITY			TIME			
ACTIVITY	DAV	DATE	TIM	IE		
	DAY	DATE (Please Specify)	FROM	то		
Arrival	DAY					
Arrival Site Setup	DAY					
	DAY					
	DAY					
	DAY					
	DAY					
Site Setup	DAY					
Site Setup	DAY					
Site Setup	DAY					
Site Setup	DAY					
Site Setup Operating/Trading	DAY					
Site Setup Operating/Trading Site Clearance	DAY					
Site Setup Operating/Trading Site Clearance Departure		(Please Specify)				
Site Setup Operating/Trading Site Clearance Departure	ating Capacity (if App	(Please Specify)				

Risk Assessment & Public Liability Insurance Completed (Tick)

Maximum No. of Powered Rides, Stalls, Temporary Accommodation/Vehicles

SITE	POWERED RIDES	STALLS	TEMP. ACCOMODATION
Fairfield Rec., Burgess Hill	5	10	10
King George's Field, East Grinstead	10	20	20
Lindfield Common, Lindfield	10	20	30
Victoria Park, Haywards Heath	10	20	20
Number Attending This Event			

Signed	Office Held
Signed	Office Held
I/we confirm that I am / we ar	re authorised to act on behalf of the above.
I/we have received, read, u standard "Conditions of Hire" (nderstood and agree to abide by Mid Sussex District Council's (see enclosed).
	s properly applicable as laid down in Mid Sussex District Council's se the facilities in a proper and reasonable manner.
Hereby apply on behalf of for the hire of the facilities me	ntioned above.
I/we Mr/Miss/Ms/Mrs (full nam	nes)
DECLARATIONS AND SIGNATURE	
5.	
4.	9.
3.	8.
2.	7.
1.	6.

IMPORTANT: By signing this application form you are agreeing to the terms of the enclosed "Conditions of Hire".

PLEASE RETURN THIS FORM TO:

Outdoor Services Mid Sussex District Council Oaklands Oaklands Road

Haywards Heath West Sussex RH16 1SS

Tel: 01444 477379 Fax: 01444 477464

Email: bookings@midsussex.gov.uk

Web: www.midsussex.gov.uk

