|  |  |
| --- | --- |
| **Application for Crematorium Viewing Room Hire** | **NOTE:**   1. All questions must be answered fully 2. All information is strictly confidential – please refer to our Privacy Policy available on our website |

**How to complete the form**

1. Part A, Part B and Part C must be completed by an applicant who wishes to hire the Viewing Room at Gungahlin Crematorium.
2. Part D must be completed by Canberra Memorial Parks.

**Part A: Application for Hire**

**Applicant Details**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Surname |  | Other names |  | | |
| Address |  | | | Postcode |  |
| Contact Number |  | Email |  | | |
| Organisation/Entity Name  (if applicable) |  | ABN/ACN  (if applicable) |  | | |

**Part B: Service Details**

**This venue hire is for (tick whichever applicable):  Memorial Service  Viewing of Charge Bier (start of cremation process)**

|  |  |  |  |
| --- | --- | --- | --- |
| Number of Attendees (approx.) |  | Date of Service |  |
| Entry Time to Venue |  | Exit Time from Venue |  |
| Special Requirements (number of chairs, A/V, live-streaming, lectern) |  | | |

**Part C: Applicant Signature**

|  |  |
| --- | --- |
| **Signature of Applicant** |  |
| **Date** |  |

**Part D: Office Use Only**

|  |  |
| --- | --- |
| **Receipt Ref. #** |  |

Receipt generated

Verified correct and complete

|  |  |
| --- | --- |
| **Signature** |  |
| **Name** |  |
| **Date** |  |