**St Peter’s Episcopal Church, Kirkcaldy: Booking Form**

**Charity Number: SCO10443**

**THE PREMISES ARE LET OUT IN SESSIONS OF 4 HOURS:**

SESSION 1: 0900 – 1300

SESSION 2: 1300 – 1700

SESSION 3: 1800 – 2200

**COST:**

CHURCH: £30 - £40 PER SESSION CAPACITY: 80

LARGE HALL: £30 PER SESSION CAPACITY: 50

SMALL MEETING ROOM: £20 PER SESSION CAPACITY: 12

* All lets include use of the kitchen to make hot/cold drinks. Tenants use their own provisions and the kitchen is left as found. Please advise on the booking section whether or not you will be using the kitchen.
* One dedicated parking space (Space 15) is available to tenants.
* In accordance with current Covid guidelines, tenants are required to administer Track & Trace systems. It is the responsibility of tenants to follow current Scottish Government Covid Protocols.
* A caretaker will set up rooms in accordance with instructions listed on the booking form.
* WiFi Internet available.
* Tenants are asked to strictly adhere to their booking times and not arrive too early. This is to facilitate deep cleaning, change of use and heating requirements.
* Payment to Treasurer, Judy Webster, either by cheque made payable to ‘St Peter’s Episcopal Church’ or for bank transfer details, please contact:

websterwebs1@sky.com

For further information please contact Andrea Ladyka

Email: bookings@stpeterskirkcaldy.co.uk

Mobile: 07740 910221

**Details of who is making the booking:**

**Organisation:**

**Contact Name:**

**Address:**

**Telephone:**

**Email:**

**Details of Requirements**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  **SESSION** | **NUMBER** **ATTENDING** | **KITCHEN** **YES/NO** | **CARETAKER** **YES/NO** |
| **CHURCH** |  |  |  |  |
| **LARGE HALL** |  |  |  |  |
| **SMALL ROOM** |  |  |  |  |

**Single Meeting: Day/Date:**

**Block Meeting: Start Day/Date and Subsequent Day/Dates:**

Caretaker Requirements:

e.g. hall set out in meeting style

 2 tables set up in vestibule

**Contact details for person in your organisation who is St Peter’s Key Holder:**

**Name:**

**Phone Number:**

**Email Address:**

**Signed: Date:**

**All tenants are responsible for their own Public Liability Insurance**