



## AUDITORIUM HIRE AGREEMENT

I \_\_\_\_\_ have received, read and agree to the Conditions in the policy *PTOP0002- Terms and Conditions of Hire* of The Players Theatre Inc.

Below are the required contact details.

<b>Name of Hirer / Organisation</b>				
<b>ABN</b>				
<b>Contact Name:</b>				
<b>Contact Details:</b>	Phone		Mobile	
	E-mail			
	Street Address			
<b>Billing Details: (if different from above)</b>	Phone		Mobile	
	E-mail			
	Postal Address			

As the authorised officer of hirer/organisation

Signed