Request for issue of Licence

A. Name of School:		
Roll No.:		
Address of School:		
Telephone No. of School:		
Email Address of School:		
Parish:		
School Year:		
Name of Principal:		
Contact No. of Principal:		
Name of Chair of Board of Management:		
Contact No. of Chair of Board of Management:		
B. Name of Independent Contractor:		
Address of Independent Contractor:		
Telephone No. of Independent Contractor:		
Email Address of Independent Contractor:		
C. Proposed Activity:		
Proposed Licensed Area: (specify area/rooms to be used)		
Will access to any other part of the school be required (e.g. toilets etc.)		
Licence Period:1st September 30th June		
Proposed Days and Times:		
If Children are involved:		
(i) Limit of number of children allowed to take part (as per insurance policy):		
(ii) Minimum age of children allowed to take part (as per insurance policy):		

A. Insurance 1. (a)The Independent Contractor has Public Liability Insurance YES The Insurance Company/Broker is (Insurance Broker/Company). (b)The limit of the indemnity under the said insurance policy is (minimum 66,500,000.00). 2. (a) The Independent Contractor has employees. YES NO Please note that "NO" may only be selected in the event that the Independent Contractor does not have Employees. (c)The limit of the indemnity under the Employers Liability Insurance. YES NO Please note that "NO" may only be selected in the event that the Independent Contractor does not have Employees. (c)The limit of the indemnity under the Employers Liability Insurance policy is: (c)The limit of the indemnity under the Employers Liability Insurance policy is: (minimum 613,000,000.00). 3. The independent contractor has confirmed in writing that the insurance cover under the policy/policies extends to cover the activities being undertaken (including vicarious liability of employees). YES 4. The Independent Contractor's Insurance Broker/Company has confirmed in writing that the insurance policy provides an indemnity to the Board of Management, the Patron and the Trustees of the Parish/ Diocese (written confirmation enclosed). YES 5. A copy of the schedule to the insurance policy/policies has been furnished to me by the Independent Contractor (and a copy of this schedule is enclosed). YES 6. Garda Vetting 6. I have reviewed the Garda Vetting letter(s) received by the Independent Contractor and any/all employees and no issues arise. YES 7. Accommodation 7. The room(s) to be used by the independent contractor is/are surplus to requirements for the current School year. YES 8. The participants in the proposed activity are: Adults 7. Participants 8. The participants in the proposed activity are: Adults 8. The participants in the proposed activity are: Adults 9. The Independent Contractor has signed the agreed Form 1 ("Form to be Signed by Independent Contractor and submitted to the Board"). Y		for t	Licence Fee of € (per hour/per week/per month) is to be paid the use of the Licensed area by the Licensee to the Board of Management on behalf of the stees of the Parish.
The Insurance Company/Broker is	Ε.	I,	, Principal, hereby confirm:
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13. The Independent Contractor has confirmed that he/she/it will incorporate the proposed recommended wording into any reference to any activities in the school on the website. YES		14.	
recommended wording into any reference to any activities in the school on the website. YES		13	—
		13.	
		T.	

14. The administration fee of €50 has been received and is enclosed herewith. Y	TES \square
J. <u>Key Deposit</u>	
15. A key deposit of € has been received from the Independent	nt Contractor (if
applicable) YES NO	
K. <u>Caretaking Arrangements</u>	
16. Caretaking arrangements have been agreed between the School and the Independent	ndent Contractor
for the current School year. YES	
I enclose herewith the following documentation:	
(1) Form 1 signed by the Independent Contractor (Original signature requipages to be returned)	ired and three
(2) Copy relevant Insurance Policy/Policies Schedule	
(3) Copy Letter confirming Indemnity from Insurance Broker/Company to Management, the Patron and the Trustees of the Parish/ Diocese	the Board of
(4) Copy Letter to Parish Priest advising of proposed licence application	
(5) Administration Fee of €50 - (payable to Bishop of Cloyne Charities)	
Please issue Licence in duplicate for execution by the Licensee. I confirm that the Licenseil will then be returned to the Cloyne Diocesan Centre for execution on behalf of the Parish/Diocese.	-
Signed: Dated:	
Principal	
I confirm that the Board of Management has approved the above request for the issue	of a licence.