Ballantrae Community Association

Annual Affiliation Form 2024/2025

Rules of Affiliation

- The annual fee for affiliation will be £75, this will give your group access to Ballantrae Hall for all your regular meetings and club activities.
- All meetings must booked in advance with the Community Association bookings Secretary.
- This form must be completed by April 30th this year.
- Your affiliation fees will come due on 1st September this year and must be paid before the end of September
- All fund raising events in the hall, which your group carries out will be charged in addition to your affiliation fees, at the reduced rate for affiliated groups. Details of current charges can be found on the hall booking form.
- As part of your affiliation you must ensure that a member of your group attends all main Community Association meetings (generally 2 hour, 4 times a year).
- If your group is not taking a stall at Gala, we ask that you give a raffle prize or a donation of not less than the cost of a stall at the Gala.

Please find attached the Annual Hall booking form, will you please ensure that all sections of the form are completed, including any one off annual events, as well as your weekly hall bookings. If you have any queries please do not hesitate to contact: Bookings secretary at Ballantrae-ca@outlook.com

Ballantrae Community Association

Affiliation Form 2024/2025

Please note this form should be completed for your weekly meetings and any known one off annual events.

Name of Group:_____

Number in Group _____

Day Required _____

Time From:_____ to_____

Weekly_____ or Monthly_____

Start Date_____ to Finish Date_____

Annual Events:_____

_____

_____

Room Requirements:(please tick all that apply)

Buffet Room _____

Main Hall _____

Kitchen _____

Groups hiring the hall, who are working with children aged 0 to 16, must have an up to date child protection policy in place:
Are you working with this age group YES / NO (please delete as appropriate)

If yes do you have a child protection policy YES / NO (please delete as appropriate)

Signed:_____

Office Held:_____

Telephone number:_____

Email Address:_____

Address:_____

_____