

Activity Application Form

This activity application form is to be completed by all individuals and organisations intending to come to Talkin Tarn for a school visit, sponsored walk or other small scale visit involving a number of individuals.

The purpose of the form is to make Talkin Tarn Country Park aware of your visit to ensure all Health and Safety procedures are in place and to enable us to ensure that your activity will not be affected by other events taking place in the park.

Please ensure that this form is completed and returned at least 2 weeks prior to your visit. Please return along with all appropriate documents, as detailed on page 3 of application, to <u>talkintarn@cumberland.gov.uk</u>

Thank you



| Proposed Activity |
|-------------------|
| Activity date |
| Time Start |
| Time Finish |

| 2. Activity Organiser Details | | | | |
|---|---|----------------------|--|--|
| • | Activity organiser/s | | | |
| • | Contact address | | | |
| | | | | |
| | Postcode | | | |
| • | Person responsible on site (if different to activity organiser) | | | |
| • | Tel No Home | | | |
| • | Tel No Work | | | |
| • | Mobile No | | | |
| • | E-mail address | | | |
| | | | | |
| | 3. Activity Details | | | |
| • | Description of activity proposed | | | |
| | | | | |
| | | | | |
| | | | | |
| • | Is this a (please tick one box only) | | | |
| | Charity event Fund r | raising | | |
| | Non-commercial Comm | nunity service event | | |
| | | | | |
| • | For Charity Event - Name of Charity | | | |
| • | Charity Registration Number | | | |
| • | • Will there be a public collection for the charity? (pleas | e tick) Yes No | | |
| • | Will all income raised go to the Charity concerned? (please tick) Yes No* | | | |
| * If no, please give details, such as stating what percentage of income will go to charity: | | | | |
| Approximate number of people expected to attend | | | | |
| | | | | |

4. Health and Safety

Public Liability Insurance

Activity Organisers are required to hold a current policy of Insurance in respect of £5million Public Liability or Third Party risks (including products liability where appropriate).

Please attach a copy of your Employers & Public Liability Insurance Certificates with your application, at least 2 weeks before your visit. Failure to comply may result in the Council refusing to grant permission for your visit.

Risk Assessment

For all events taking place on Council land we require a completed Risk Assessment. **Please** attach a copy of your Risk Assessment with your application.

5. First Aid/Medical Provisions

Please supply details of the first aid cover to be provided at your activity

6. Talkin Tarn Terms and Conditions

- All buses/cars must be parked in the main car park and appropriate fee paid
- If den/shelter building then all structures must be dismantled at the end of your visit
- All litter to be collected and disposed of appropriately
- All groups must have adequate first aid cover and qualified first aiders in place
- All members of staff with direct contact with children must have appropriate DBS checks carried out
- All participants must abide by the Countryside Code
- All participants must consider all other site users

7. DECLARATION

I accept that by granting permission for the activity the Council does not accept any responsibility for the organisation or management of the activity.

| Signed | | | | |
|--------------------------------|-------------------------------|--|--|--|
| Position | | | | |
| Date | | | | |
| I have enclosed the following: | | | | |
| Documentation | Evidence of insurance | | | |
| Risk Assessment | Insurance for event organiser | | | |