



Wagga Wagga Four Wheel Drive Club Inc.
Post: P.O. Box 5842, Wagga Wagga, NSW 2650
Web site: www.wagga4wdclub.org
Email: secretary.wagga4wdc@gmail.com
Facebook: Wagga 4WD Club Inc.

EXTERNAL ORGANISATION/AGENCY REQUEST for QUARRY TRAINING AREA KEY ACCESS

Applicants must read the Quarry Training Area (QTA) Policy before completing this form.

Applicants from External Organisations/Agencies must have lodged an Application for Use of the QTA, and have the proposed activities approved by the Quarry Training Area Sub Committee.

Please print

Organisation/Agency:	
Name of Applicant:	Contact phone no:
The organisation/agency has written approval to use the QTA: Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]	
This organisation has supplied a copy of the current Public Liability Insurance Policy: Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]	
Date/s of use requested:	Times:
Purpose of use:	
Number & type of vehicles:	
Club resources requested:	
How will toilet facilities be provided for participants?	
I agree that: <ul style="list-style-type: none"> • Participants will abide by the QTA Policy and Conditions for Use. • The person conducting the activity has appropriate skills and the authority of the organisation. • The person conducting the activity has responsibility for the safety of all participants. • A Risk Assessment for the activity has been undertaken and documented. • I shall return the key within 24 hrs of completion of the activity. 	
Signature of applicant:	Date:

Wagga 4WD Club Inc. (office use)		
QTA Committee approval: Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]		
Approved by:		Date:
Additional conditions of use:		
Date key signed out:	Key custodian Name:	Signature:
Date key returned:	Key custodian Name:	Signature:

Post Activity:

Report of incidents, accidents or issues:
Condition of equipment & QTA after activity:
Action taken if required:

Completed form to be kept on file by WW4WDC for 6 years.