



CENTRE FOR RURAL & REMOTE HEALTH



JAMES COOK UNIVERSITY AUSTRALIA

Centre for Rural and Remote Health Mount Isa
James Cook University
PO Box 2572
Mount Isa QLD 4825
Telephone: (07) 4745 4500
E-mail: micrrh.admin@jcu.edu.au
Web: www.micrrh.jcu.edu.au

FACILITIES BOOKING REQUEST

Date Submitted :

1. Organisers Details

Organiser's Name :

Organisers Contact No :

Company / Organisation Name :

Email Address :

2. Activity Information

Name of activity :

Number of people :

One time booking - date : start time : end time :

Weekly / Fortnightly -

to occur every : start date : end date : start time : end time :

Monthly - to occur on the : (day)

starting on the : ending on the :

start time : end time :

3. Room and Layout

Please select how you would like the room set up for the available options below. Please note some arrangements are not possible in some rooms. Note: Tables are rectangle

Groups of tables and chairs

U shape

Board room layout

Chairs only

If there is a specific room you would like to request please select your preferences below. Also not, room allocation is subject to availability.

Preference 1 :

Preference 2 :

Comments :

4. Audio, Visual and Conferencing Facilities

Please select what facilities you will require and read the Terms of Use. Please note the facilities marked with a '*' are only available in certain rooms.

Laptop and data projector

Tele-conference

Video conference

Skype *

Comments :

5. Clinical Education Simulation Unit – Second Booking Form to be Completed

For all Clinical Education Simulation Unit bookings you will be required to attend a mandatory induction and orientation with the CRRH simulation team prior to the day of your activity. Your booking will not be confirmed and you will not be permitted access to the unit without approval from a member of the simulation team.

CESU Lab (resus room)

CESU Ward (ward)

CESU Debrief Room

Please be aware that several sessions can be run concurrently and that you may be sharing the facilities with others.

4. Activity Details

Please provide a short description of the activity, detailing information such as the objective, purpose and who the activity is aimed at. Please also include why the type of activity it is (meeting, educational, community information session, patient consultation).

5. Activity Information Circulation

The CRRH works in partnership with many service providers and can assist in circulation details about your activity. Do you consent for the CRRH to share information about your activity through their networks?

Yes, please (please attach relevant flyers/posters)

No, thank you

TERMS OF USE :

1. It is asked that a CRRH Attendance Sheet be completed either by participants or the facilitator and is returned to reception at the conclusion of the activity.
2. The organiser / facilitator is required to report to reception to be given access to the facilities and to be advised of the buildings emergency procedures. (It is your responsibility to ensure all participants are made aware of these.)
3. The organiser / facilitator is responsible for the safety and wellbeing of all participants associated with the activity.
4. Yourself, a member of your organisation or an activity participant, are not permitted to move, or remove, any furniture or equipment from the rooms.
5. Yourself, a member of your organisation or an activity participant, are not permitted to change, or alter, the settings or set up of the IT or audio visual equipment. Please bring all presentations on a USB as you will not be permitted to use your own laptop.
6. If you are utilising the facilities on a weekend or public holiday, yourself or your organisation will be responsible for performing the housekeeping duties at the conclusion of the activity. This includes, but is not limited to - wiping over the tables, packing and unpacking the dishwasher, mopping and emptying the bins.

Please note:

* We do not organise catering - this is your responsibility.

* If you use the kitchen facilities it is your responsibility to make sure it is left clean.

* The kitchen is a communal area for staff, students, participants and other members of the community; please DO NOT take anything that does not belong to yourself or your organisation.

I understand, acknowledge and agree to the terms of use and accept any and all charges

I confirm that our organisation has appropriate level of insurance to cover any damages mentioned in the terms of use

Signature :

Date :

CRRH USE ONLY: Calendar entry Saved on i:drive Attached Confirmation email sent