



APPLICATION FOR PERMISSION TO CONSUME ALCOHOL AT A SCOUT FUNCTION

Form: F20
Issue: 02
Date: 08/06

APPLICANT DETAILS (FUNCTION ORGANISER)

Name _____ Formation _____

Position _____

Phone _____ Mobile _____

Email _____

Address _____

Suburb _____ Post Code _____

FUNCTION DETAILS

Name _____

Location _____ Expected Number of Attendees _____

Start Date/Time _____ Finish Date/Time _____

Will there be people under the age of 18 years present? Yes No

Will there be a liquor licence for the event? Yes No

Expected alcohol consumption times _____

SIGNATURE

I (Person named above), the applicant, will ensure that alcohol is consumed in a safe and legal manner.

Signature _____ Date _____

CHIEF COMMISSIONER'S APPROVAL

Conditions:

I, the Chief Commissioner, approve for alcohol to be consumed at the location above as long as the above conditions (if any) are adhered to.

Signature _____ Date _____