

South Somerset District Council
The Council Offices, Brympton Way
Yeovil, Somerset, BA20 2HT

Application for a premises licence to be granted
under the Licensing Act 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

I/We ILMINSTER SPORTS CLUB LIMITED

(Insert name(s) of applicant)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description			
ILMINSTER SPORTS CLUB LIMITED			
THE LAND ADJACENT TO CANAL WAY			
ILMINSTER			
SOMERSET			
Post town	ILMINSTER	Postcode	TA19 0EB

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
 - i. as a limited company please complete section (B)
 - ii. as a partnership please complete section (B)
 - iii. as an unincorporated association or please complete section (B)
 - iv. other (for example a statutory corporation) please complete section (B)

- c) a recognised club please complete section (B)
- d) a charity please complete section (B)
- e) the proprietor of an educational establishment please complete section (B)
- f) a health service body please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England please complete section (B)
- h) the chief officer of police of a police force in England and Wales please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm:

Please tick yes

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or

I am making the application pursuant to a statutory function or

a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
Post town			Postcode		
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
Post town		Postcode			
Daytime contact telephone number					
E-mail address (optional)					

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name	ILMINSTER SPORTS CLUB LIMITED	
Address	THE LAND ADJACENT TO CANAL WAY ILMINSTER SOMERSET TA 19 0EB	Registered address 1 Cornhill Ilminster Somerset TA19 0AD
Registered number (where applicable)	9473005	
Description of applicant (for example, partnership, company, unincorporated as)	LIMITED COMPANY	
Telephone number (if any)		
E-mail address (optional)		

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY

If you wish the licence to be valid only for a limited period, when do you want it to end?

DD	MM	YYYY

Please give a general description of the premises (please read guidance note 1)

CLUBHOUSE WITH CHANGING ROOMS AND FUNCTION ROOM

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

- | | | |
|----|--|-------------------------------------|
| | ed entertainment | Please tick any that apply |
| | g yes, fill in box A) | <input type="checkbox"/> |
| | g yes, fill in box B) | <input type="checkbox"/> |
| | g events (if ticking yes, fill in box C) | <input checked="" type="checkbox"/> |
| | sting entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| | icking yes, fill in box E) | <input checked="" type="checkbox"/> |
| | c (if ticking yes, fill in box F) | <input checked="" type="checkbox"/> |
| | of dance (if ticking yes, fill in box G) | <input checked="" type="checkbox"/> |
| h) | anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input checked="" type="checkbox"/> |

Provision of late night refreshment (if ticking yes, fill in box I)

Supply of alcohol (if ticking yes, fill in box J)

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 6)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon				<u>Please give further details here</u> (please read guidance note 3) NATIVE PLAYS	
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 4)		
Thur	0800	2000			
Fri	0800	2000	<u>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat	0800	2000			
Sun	0800	2000			

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	0900	23 59	<u>Please give further details here</u> (please read guidance note 3) <i>KARAOKE, RACE NIGHTS (AS FUNO RAISER)</i>	Both	<input type="checkbox"/>
Tue	0900	23 59			
Wed	0900	23 59	<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4) <i>CHRISTMAS EVE AND NEW YEARS EVE 0900 UNTIL 0100 THE FOLLOWING DAY</i>		
Thur	0900	23 59			
Fri	0900	23 59	<u>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat	0900	23 59			
Sun	0900	23 59			

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	THE PLAYING OF INDOOR GAMES/ SPORTING EVENTS SUCH AS SKITTLET AND DARTS WHICH MAY, ON OCCASION ATTRACT AN AUDIENCE
Mon	1800	2300	
Tue	1800	2300	<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Wed	1800	2300	
Thur	1800	2300	<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 5)
Fri	1800	2300	
Sat	1800	2300	
Sun	1800	2300	

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place <u>indoors or outdoors or both</u> – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3) LIVE MUSIC INCLUDING BANDS OF UP TO 15 MEMBERS. MUSIC WILL BE AMPLIFIED	Both	<input checked="" type="checkbox"/>
Tue					
Wed					
Thur			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 4) CHRISTMAS EVE AND NEW YEAR'S EVE 1800 – UNTIL 0100 THE FOLLOWING DAY		
Fri	1800	2359	<u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat	1800	2359			
Sun					

IF OR WHEN PERFORMANCES ARE OUTSIDE THEY
 WILL TAKE PLACE ON MAIN PITCH ONLY. THIS
 ACTIVITY WOULD BE RESTRICTED TO A MAXIMUM
 OF 4 TIMES PER YEAR AND DURING THE PERIOD
 OF MAY – AUGUST.

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place <u>indoors or outdoors or both</u> – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	0900	2359	Please give further details here (please read guidance note 3) <i>DISCO'S, JUKE BOX AND KARAOKE</i>	Both	<input type="checkbox"/>
Tue	0900	2359			
Wed	0900	2359	State any seasonal variations for the playing of recorded music (please read guidance note 4) <i>CHRISTMAS EVE & NEW YEARS EVE 0900 UNTIL 0100 THE FOLLOWING DAY</i>		
Thur	0900	2359			
Fri	0900	2359	Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat	0900	2359			
Sun	0900	2359			

G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	0900	2300	Please give further details here (please read guidance note 3)		
Tue	0900	2300			
Wed	0900	2300	State any seasonal variations for the performance of dance (please read guidance note 4)		
Thur	0900	2300			
Fri	0900	2359	Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat	0900	2359			
Sun	0900	2200			

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing <i>ACTIVITY LIKE MUSIC/DANCE</i> <i>COMEDY. AFTER DINNER SPEAKER</i>		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Mon	11 00	23 00		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue	11 00	23 00	Please give further details here (please read guidance note 3) <i>AMPLIFIERS/MICROPHONES MAY BE USED AS APPROPRIATE</i>		
Wed	11 00	23 00			
Thur	11 00	23 00	State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4) <i>CHRISTMAS EVE AND NEW YEAR'S EVE</i>		
Fri	11 00	23 59	<i>11.00 UNTIL 0200 THE FOLLOWING DAY</i>		
Sat	00 00	02 00	Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list (please read guidance note 5)		
	14 00	23 59			
Sun	00 00	02 00			
	11 00	22 30			

I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Wed					
Thur			<u>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</u> (please read guidance note 5)		
Fri					
Sat					
Sun					

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4) CHRISTMAS EVE AND NEW YEAR'S EVE 1100 UNTIL 0200 THE FOLLOWING DAY Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 5)		
Mon	1100	2300			
Tue	1100	2300			
Wed	1100	2300			
Thur	1100	2300			
Fri	1100	23.59			
Sat	00.00	0200			
	1100	23.59			
Sun	0000	0200			
	1100	1030			

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor:

Name	
Address	
Postcode	
Personal licence number (if known)	
Issuing licensing authority (if known)	

K

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 8).

WE MAY WANT TO HAVE ADULT ENTERTAINMENT
 BUT WILL RESTRICT THIS TO OUR 18'S ONLY AND
 WE WILL HAVE DOOR SUPERVISORS PRESENT.

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)	
Day	Start	Finish		
Mon	0000	0030	CHRISTMAS EVE AND NEW YEARS EVE 0900 UNTIL 0230 THE FOLLOWING DAY.	
	0900	2359		
Tue	0000	0030		
	0900	2359		
Wed	0000	0030		
	0900	2359		
Thur	0000	0030		<u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u> (please read guidance note 5)
	0900	2359		
Fri	0000	0030		
	0900	2359		
Sat	0000	0230		
	0900	2359		
Sun	0000	0230		
	0900	2359		

M Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b, c, d and e) (please read guidance note 9)

b) The prevention of crime and disorder

c) Public safety

d) The prevention of public nuisance

e) The protection of children from harm

Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee.
- I have enclosed the plan of the premises.
- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.
- I understand that I must now advertise my application.
- I understand that if I do not comply with the above requirements my application will be rejected.

IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION.

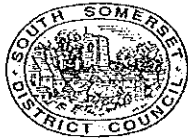
Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 11). If signing on behalf of the applicant, please state in what capacity.

Signature	<i>ASZ</i>
Date	<i>11TH MARCH 2015.</i>
Capacity	<i>DIRECTOR</i>

For joint applications, signature of 2nd applicant or 2nd applicant’s solicitor or other authorised agent (please read guidance note 12). If signing on behalf of the applicant, please state in what capacity.

Signature			
Date			
Capacity			
Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13) <i>EMAIL . eafish@btinternet.com</i> <i>PHONE NO° 07875378663</i>			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			



South Somerset District Council

The Council Offices, Brympton Way, Yeovil BA20 2HT

Consent of individual to being specified as premises supervisor

I
[full name of prospective premises supervisor]

of
.....
.....
[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

.....
[type of application]

by
[name of applicant]

relating to a premises licence
[number of existing licence, if any]

for
[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made

by
[name of applicant]

concerning the supply of alcohol at

.....
.....
.....
[name and address of premises to which application relates].

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number
[insert personal licence number, if any]

Personal licence issuing authority

.....

.....

.....
[insert name and address and telephone number of personal licence issuing authority, if any]

Signed:

Name (please print):

Dated:

Notes for Guidance

1. Describe the premises, for example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies, you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, each of the applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

General - all objectives

~~1. A Personal Licence holder will be on the premises at all times the licence is being used for licensable activities.~~

Prevention of Crime & Disorder

1. CCTV to be installed to the satisfaction of Avon and Somerset Constabulary and to be retained for a period of 31 days. The images shall be made available to the Police and SSDC upon request. The correct time and day shall be generated onto the recording. If the CCTV system fails, then the Police and SSDC Licensing to be informed immediately.

2. There must be at least one trained person available who can operate and create evidential discs at the premises whilst licensable activities are taking place.

3. A risk assessment must be carried out in respect of the premises to determine the number of door supervisors who shall be on duty for each public opening. Where the venue is booked for an 18th Birthday, 21st Birthday or Prom (a celebratory gathering of young people predominantly under the age of 22 years) there shall be a minimum of two door supervisors present from the start of the event to 15 minutes after the event finishing.

4. The Premises Licence Holder will ensure that where door supervisors are employed at the premises, they enter in a register kept for the purpose their full name, badge number (including expiry date) and time they began their duty and the time they completed their duty, immediately after doing so. The register is to be kept at the premises at all times and should be so maintained as to enable a

Police or Licensing Officer to establish the particulars of all door supervisors engaged at the premises during the period of not less than 21 days prior to the request and shall be open to inspections by officers of the Licensing Authority or Police Officers upon request.

5. Any female customer who needs to be searched will be searched by a female door supervisor or a female member of staff.

6. The Premises Licence Holder will co-operate with the Responsible Authorities in relation to dealing with the issues of drugs on the premises. A drug policy will be drawn up and agreed with the Police. This Policy to be reviewed 6 monthly.

7. Drugs policies/notices will be displayed on the premises.

8. Random searching will be carried out of these individual suspected of carrying drugs or offensive weapons.

9. Confiscated drugs or weapons will be held in the premises safe and the Police will be notified without unreasonable delay.

3. RISK ASSESSMENTS WILL BE CARRIED OUT FOR FUNCTIONS TAKING PLACE TO DETERMINE IF DOOR SUPERVISORS ARE REQUIRED AND NUMBER OF DOOR SUPERVISORS REQUIRED.

1. *Chlorophyll a* and *Chlorophyll b* are the primary photosynthetic pigments in green plants. They absorb light energy and convert it into chemical energy through the process of photosynthesis.

OPEN

10. The Premises Licence Holder shall ensure that any bottles or glasses are removed from persons leaving the premises.
11. The Challenge 21 Scheme shall be operated at the premises. A refusals register will be maintained at the premises and will be reviewed weekly by the Designated Premises Supervisor. This document will be made available to Responsible Authorities upon request.
12. The Premises Licence Holder shall be an active member in any Pub watch or similar scheme that operates in Ilminster.
13. An incident book will be kept at the premises in which will be recorded all incidents of crime and disorder. Senior management in association with the Designated Premises Supervisor will review this book. This book shall be made available to the Licensing Authority or Police Officer upon request.
14. All staff who work behind the bar will be fully trained to ensure that no person who is knowingly drunk or disorderly or appears to be under the age of 18 years is served with intoxicating liquor, such training will be repeated every 6 months and training records retained. Training of all staff will include the requirement for Persons looking under the age of 21 to be asked for photographic evidence by way of passport or drivers licence. The records should be made available to the Licensing Authority or Police Officer upon request.
15. A dispersal policy to be drawn up and agreed with the Police. This is to be reviewed 6 monthly.
16. A Smoking Policy to be drawn up and agreed with the Police and Licensing Authority.
17. ~~No drinks to be taken outside into the smoking area.~~
18. Adequate lighting must be provided.

Public Safety

1. Special effects such as smoke machines are prohibited.
2. An adequate and appropriate supply of first aid equipment and materials must be made available.
3. ~~No drinks shall be permitted on the balcony unless they are in plastic containers/plastic glasses. Any bottles shall be departed.~~

Prevention of Public Nuisance

1. Noise patrols must take place when licensable activities are taking place.
2. Doors and windows to be closed when any regulated entertainment is taking place.
3. Notices asking patrons to leave quietly must be displayed.
4. Wind down music policies must be in place.
5. ~~An audio meter must be installed to cut power to the music amplifiers if a specified noise level is exceeded.~~

NO. 10 CONTINUED.

PEOPLE WILL BE ABLE TO TAKE DRINKS OUTSIDE, BUT THEY MUST BE IN PLASTIC GLASSES. RESTRICTIONS WILL BE ON TERRACED AREA SHOWN ON PLAN AND WE WILL ALLOW PEOPLE TO DRINK FROM PLASTIC GLASSES WHEN FOOTBALL IS BEING PLAYED ON MAIN PITCH IN A CLEARLY MARKED AREA CLOSE TO THE CLUBHOUSE.

SHOWN IN PLAN (WITH HATCHING), THE CLEARLY MARKED AREA WILL HAVE SIGNS PUT UP. /PTU

WHEN LIVE MUSIC EVENTS TAKE PLACE ON THE
MAIN PITCH (BETWEEN MAY AND AUGUST) PEOPLE CAN CONSUME
ALCOHOL ON THE PITCH BUT ALL DRINKS WILL BE IN
PLASTIC GLASSES.

PLEASE REUSE YOUR PLASTIC GLASSES

PLEASE REUSE YOUR PLASTIC GLASSES

PLEASE REUSE YOUR PLASTIC GLASSES

Protection of Children

1. All children under 16 to be accompanied by an adult in ~~areas where licensable activities take place.~~
2. The applicant will have a robust child/vulnerable person protection policy in place applicable for both day-to-day operation and for any hirer of the premises.
3. All appropriate staff must be checked by the Criminal Records Bureau or the body currently exercising this authority/power.

THE BAR AREAS. (shown on plan as seating area and function room)

