

Child Restraint Hiring Booking Form

Applicant Details

Name

Street Address

Postal Address

Email Address

Telephone

Mobile

Child Restraint Required:

Tick preferred Child Restraint

- Baby Capsule (Birth to 6 months)
 Convertible (Birth to 4 years)
 Booster (4 years to 7 years)

Hire Period Required:

Tick preferred option

- 1 Week
 1 Month
 3 Months
 6 Months
 Other _____

Date Required: _____ to _____

Additional Comments

Office Use Only

Information Pack

- By mail on: _____
 Front Counter on _____
 Emailed on: _____
 Already has one

Confirmation of Booking

- Booking Confirmed: _____
 Entered into "Booking Spreadsheet"
 Organised date & time for hirer to collect restraint on: _____ am/pm

Pre-Hire Preparations

- Child restraint awaiting at admin building
 Child restraint pre-hire inspection completed
 All documentation including booking form, contact and inspection sheet completed and placed in the folder at Front Counter