



Manurewa Marae Hireage Form

81 Finlayson Ave, Manurewa, P O Box 88-161, Clendon

Phone: (09) 267 8768 Mob: (021) 1463764

Email: admin@manurewamarae.co.nz

www.manurewamarae.co.nz

User ID: _____

Hireage Number: _____

Contact Name: _____ Date: _____

Hireage Name: _____

Address: _____

Email Address: _____

Wk Number.: _____ Fax Number: _____

Mob Number: _____ Home Number: _____

The purpose of the hireage is: _____

Bookings Requests:

We wish to book the Manurewa Marae for the following date/s: _____ From: _____ To: _____

Arrival Time: _____ Departure Time: _____

➤ Has your group used the Marae before? **YES / NO**

(If No your group must go through a Powhiri process. Please note if your arrival time is after dark, a mihi Whakatau will be arranged) Powhiri Time: N/A

➤ Do you require a person to accompany your group onto the Marae, during the Powhiri? **YES / NO**

➤ Sleepover Required? **YES / NO** Number of expected Guests: _____

➤ Is Linen Required? **YES / NO** (please note linen can be hired out)

➤ Induction Date: (within a week of hireage) _____

Emergency Marae Staff Contact: Pengu Anderson - 0211463764

➤ Room/s: _____

➤ Hireage Rate: _____

➤ Deposit: _____

➤ Koha: _____

➤ TOTAL HIREAGE COST: _____

Cancellation

Fourteen clear days' notice in writing, or in person, to the Marae coordinator, is required for all cancellations.

- A. If you cancel booking prior, fourteen clear day notice, we will refund all payments we have received, excluding deposit/booking fee
- B. Failure to notify the Marae of a cancelled booking, may result in the loss of the bond and the hirer being subject to the full payment of the booking.

Tangihanga

In the event of a Tangi, we may have to cancel the booking. Manurewa Marae will endeavour to provide as much notice as possible, as well as try to accommodate both parties. **In such cases we** will refund payment pro-rata of your stay and bond.

I have read the hirer information of the Manurewa Marae, and agree to all of the terms. I agree to uphold all responsibilities outlined in the Marae information booklet. I understand that if we break the rules while staying on the marae, we forfeit our bond. Any damages, missing equipment and/or uncleaned premises will incur charges which will be taken out of the bond paid for hire of Marae.

If in the event, it is noted during the post inspection damages to the complex or breakages of items provided during the time the hirer has hired the marae, we will recover costs by:

- A. *Deducting from the bond;*
- B. *If the damage is extensive we will deduct the bond, obtain quotes for repair and charge the hirer accordingly as well as an admin fee for our time to collect quotes and identify suppliers;*
- C. *Otherwise, if no damages or breakages incurred, it will be a straight forward refund signed off by both parties.*

Please note if "B" is actioned a letter will be sent to the hirer highlighting repair and or replacement costs, plus administration costs less the bond. Manurewa Marae will expect payment to be made within 28 days from date of letter. If payment is overdue we reserve the right to contact BayCorp.

Should BayCorp be commissioned they may add additional costs for seeking Manurewa Marae reparation which the hirer will be expected to pay. To prevent this from happening it is advisable to pay within the 28 days from date of letter, or better still we encourage Hirers to look after Manurewa Marae.

Signed: _____ Date: _____
 (Hirer) (Full Name)

Signed: _____ Date: _____
 (Marae Staff) (Full Name)

RECORD OF TRANSACTION

TOTAL AMOUNT FOR HIREAGE	AMOUNT
First Payment: Deposit	
Date Received:	
Amount Paid:	\$
Received By:	
Receipt/Inv#:	
Total Balance Remaining:	\$
Hirers Signature:	Name of Hirer:
Marae Signature:	Name of Marae Staff:
SECOND PAYMENT	AMOUNT
Date Received:	
Amount Paid:	\$
Received By:	
Receipt/Inv#:	
Total Balance Remaining:	\$
Hirers Signature:	Name of Hirer:
Marae Signature:	Name of Marae Staff:
FINAL PAYMENT	AMOUNT
Date Received:	
Amount Paid:	\$
Received By:	
Receipt/Inv#:	
Total Balance Remaining:	\$
Hirers Signature:	Name of Hirer:
Marae Signature:	Name of Marae Staff:

BOND REIMBURSTMENT	Y/N
Date Received:	
Amount Paid:	\$
Received By:	
Receipt/Inv#:	
Hirers Signature:	Name of Hirer:
Marae Signature:	Name of Marae Staff