COVID Safe Agreement and Checklist for Venue Use and Hire

In line of guidance given as of 11:59pm on the 22nd of April 2022

The purpose of this agreement and checklist to ensure that all library meeting room hirers are aware of the Victorian Government COVID-19 directions and are committed to providing a safe environment for all participants, members, other venue hirers or workers.

As such, each hirer must be able to demonstrate that they have taken reasonable steps to comply with the Government directions and avoid a foreseeable risk of harm to those that attend their activity or event.

Based on the information provided, Council will advise whether your use or hire can go ahead. Please await this approval before planning your return to the library.

Please note that you will need to complete one form for every activity or group you facilitate.

| NAME OF LIBRARY ROOM | |
|-------------------------------|--|
| Hirer Details: | |
| Contact Name: | |
| Phone Number: | |
| Email Address: | |
| Address: | |
| Number of Expected Attendees: | |
| Purpose of Hire: | |

Safety Checklist:

| 1 | General | |
|-----|------------------------------|--|
| 1.1 | Have you completed risk | |
| | assessment prior to resuming | |
| | your sessions? Please answer | |
| | yes or no: | |
| 1.2 | What are your main risk/s? | |
| | | |
| | | |
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| | | |
| | What strategies have you put | |
| | in place to mitigate these | |
| | risks? | |
| 1.2 | Have you provided | |
| | education/communication on | |
| | physical distancing to all | |
| | members/participants to | |
| | comply with current | |
| | restrictions? | |

| 2 | Hygiene | |
|-----|---|--|
| 2.1 | Please tick the following measures you will implement to protect users against COVID-19 | Ongoing use of hand sanitiser and wipes Regular cleaning of equipment and resources throughout your booking Regular hand washing Restricting access to any areas that remain non-accessible |

| 2.2 | Have you provided | | | |
|---|----------------------------------|--|--|--|
| | information on COVID-19 | | | |
| | hygiene protocols and | | | |
| | practices to all group | | | |
| | members? | | | |
| 2.3 | Have you provided | | | |
| | information on COVID-19 | | | |
| | symptoms and transmission to | | | |
| | all group members? | | | |
| 2.4 | Have you advised participants | | | |
| | to not attend if unwell? | | | |
| 2.5 | In the event of an outbreak, all | attendees must be notified. Please outline how you | | |
| | will record the name and phone | e number of those in attendance and what steps | | |
| | · | endees to the event of an outbreak: | | |
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| Signe | d by (signature): | | | |
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| Positi | on: | - | | |
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| Date: | | | | |
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| THIS AGREEMENT IS NOT ACCEPTED UNTIL THE BELOW HAS BEEN | | | | |
| COMPLETED BY LIBRARY MANAGEMENT. | | | | |
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| Approved by (signature): | | | | |
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| Print I | Name: | | | |
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| Date: | | | | |