



## Internal Group Booking Form (WAA FM5), V003, November 2025

Please check the details entered on this form, then sign and return it to the Booking Secretary at the address below, at least 14 days before the event.

**Bookings Secretary**  
Wellington Arts Centre  
Eight Acre Lane  
Wellington  
Somerset  
TA21 8PS  
Email: [bookings@w-a-a.co.uk](mailto:bookings@w-a-a.co.uk)  
Telephone: 01823667774

**\* - Denotes fields are required**

Contact Info	
<b>Name*</b>	
<b>Email*</b>	
<b>WAA Group</b>	<input type="checkbox"/> Wellington Pantomime Group <input type="checkbox"/> Wellington Operatic Society <input type="checkbox"/> Genesis Youth Theatre <input type="checkbox"/> Wellington Theatre Company <input type="checkbox"/> Spectrum Arts & Crafts <input type="checkbox"/> Critics Club <input type="checkbox"/> Management
Event Info	
<b>Event Title*</b>	
<b>Type of Event*</b>	<input type="checkbox"/> Rehearsal <input type="checkbox"/> Meeting <input type="checkbox"/> Show <input type="checkbox"/> Other
<b>Room(s) Required*</b>	<input type="checkbox"/> Kitchen <input type="checkbox"/> Bar <input type="checkbox"/> Meeting Room <input type="checkbox"/> Hall (incl stage) <input type="checkbox"/> Hall (excl stage)
<b>Start Date of Event*</b> (DD/MM/YYYY)	



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<b>Start Time of Event*</b> (HH:MM) <i>Include setup time</i>	
<b>End Date of Event*</b> (DD/MM/YYYY)	
<b>End Time of Event*</b> (HH:MM) <i>Include clearing time</i>	
<b>Is this a repeat event?</b> (ie Rehearsals or Show etc)	<input type="checkbox"/> Yes, send schedule to <a href="mailto:bookings@w-a-a.co.uk">bookings@w-a-a.co.uk</a> with this form. <input type="checkbox"/> No
<b>Declaration</b>	<input type="checkbox"/> I have read and agree to be bound by the Health & Safety Requirements and Emergency Action Procedure (WAA FM1, WAA HS4). I also understand the <b>booking is not secured</b> until confirmed by the booking secretary.
<b>Sign</b>	
<b>Print Name</b>	
<b>Date</b> (DD/MM/YYYY)	