

KEY REGISTER FORM

City of Mandurah Recreation Services – 3 Peel Street, Mandurah (PO Box 210)

Phone: 9550 3601

Fax: 9550 3737

Email: recreationservices@mandurah.wa.gov.au

CLUB or ORGANISATION DETAILS

Club / Assoc Name	
Primary Contact	
Contact Telephone	
Address	
Venue Hired	

If you are currently in possession of keys, please complete the below key holder information.

Please list name(s) of keyholders, key number and contact phone		
* If you have an ABLOY key (black handle) the key number will be printed on the back e.g. TH8 * If you have LOCKWOOD keys the number will be embossed on back		
NAME	PHONE #	KEY NUMBER(S)
1.		
2.		
3.		
4.		
5.		
If you have more keys than what will fit in table please supply details on reverse side of this form.		

Signature

Name & Signature (of the person who completed this form)	NAME:	
	SIGNATURE:	DATE:

FOR OFFICE USE ONLY

Date keys collected	Bond Amount Paid
Bond receipt number	Date keys returned
Recreation Officer Signature	

