

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 Details

Club / Association Name	
Primary Contact	
Contact Telephone	
Email	
Venue Hired	

Please list name(s) of key holders, key number and contact phone

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

☆ If you have an ABLOY key (black handle) the key number will be printed on the back e.g. TH 8

☆ If you have LOCKWOOD keys the number will be embossed on back

NAME	PHONE #	KEY NUMBER(S)

If you have more than 3 sets of keys, please list on the other side of the page or provide list.

If you are a new club or require additional keys, please outline your requirements below:

- ◆ Please indicate which keys you require: Building Gates/Chains
- ◆ Number of Sets Required: (no more than 3)

Signature

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

Office use Only

Dates Keys collected: _____

Recreation Officer Signature: _____

Date Keys returned: _____