

Wedding Application

Form Preview

Great Ocean Road Coast And Park Authority Wedding Application

* indicates a required field

Contact Details

Applicant *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Phone Number *

Must be an Australian phone number.

Email address *

Must be an email address.

Key contact during event if different to primary contact (name and mobile) *

Must be an Australian phone number.

Your Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Partners Name

Event Details

Local Government Area (LGA) where event will be held? *

- Surf Coast Shire
- Colac Otway Shire
- Corangamite Shire
- Moyne Shire
- Warrnambool City Council
- Other:

Your event application may be shared with relevant local shire councils.

Wedding Date *

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Must be a date.

Wedding Start and Finish Time *

Please note maximum time is 2 hours

Number of guests *

Proposed Event Location *

Address

Suburb/Town, State/Province, Postcode, and Country are required.

Exact Event location *

Event Infrastructure

Will any of the following be present: (tick all applicable) *

- Arbor
- Chairs/tables
- Amplification Equipment
- Other:

Waste Management

Are you aware of Great Ocean Road Authority Plastic Reduction Policy? *

- Yes
- No

Authorisation

I am authorised to lodge this application. I understand the information requested on this form is being collected by the Great Ocean Road Coast And Parks Authority for the purpose of assessing my event and may be shared with LGA's where events are held, or other relevant agencies.

Privacy statement: The Great Ocean Road Coast and Parks Authority is committed to protecting all personal and sensitive information consistent with the principles set out in the Privacy and Data Protection Act 2014, and the Health Privacy Principles as set out in the Health Records Act, 2001. if you have any questions about the handling of your information, please email: info@GreatOceanRoadAuthority.vic.gov.au

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Authorised Person (full name) *