



WA Police Party Registration Form

Please complete all sections of the form and return **7 days before your party**:

- to your local police station in person or by fax; or
- by email to info@police.wa.gov.au

Information provided in this party registration form will be kept in strict confidence and used only by police in the event police need to respond to an incident at your party.

Street address of party	
Is your party venue:	<input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both
Venue phone number	
Day and date of party	Day: _____ Date (dd/mm/yyyy): _____
Party times	Start time: _____ Finish time: _____
Party host: Name:	
Address:	
Phone number:	Home: _____ Business: _____ Mobile: _____
Age of party host	<input type="checkbox"/> Adult: <input type="checkbox"/> Under-age
Parent/guardian name (if under-age)	
Type of celebration (eg: 18th birthday)	
Number of guests	
Average age of guests	
Type of invitation (eg: formal, verbal, etc)	
Supervision provided?	<input type="checkbox"/> YES: <input type="checkbox"/> Parental <input type="checkbox"/> Adult <input type="checkbox"/> NO
If yes, how many adults?	
Other supervision?	
Have you engaged security or crowd controllers?	<input type="checkbox"/> YES: Company: _____ <input type="checkbox"/> NO
Have you notified neighbours?	<input type="checkbox"/> YES: <input type="checkbox"/> verbal notice <input type="checkbox"/> written notice <input type="checkbox"/> NO
Alcohol availability?	<input type="checkbox"/> BYO <input type="checkbox"/> Provided <input type="checkbox"/> No alcohol
Previous party problems?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, explain problems:	

Thank you for allowing the WA Police to assist you to have a safe and enjoyable party

Acknowledgement

- YES I acknowledge that the registration of a party with WA Police does not mean that police will provide security for my party and that the capacity of police to undertake patrols of party venues or to visit a party venue in the event of trouble will depend on other demands on resources at the time and the nature of the event in question.

POLICE USE ONLY	
OFFICER NAME:	
RANK:	No.
Police station:	Date received:
Fax to: Communications Incident Manager	