Personal Training Within Logan Parks

If you are interested in conducting Personal Training, within Logan City Council Parks, you are required to carry a permit issued by Logan City Council Parks Branch. There is currently no application or associated fees, however this is subject to change, without notice.

Before a permit can be approved, you are required to provide documentation and contact details as outlined below. You can email copies of your certificates and this <u>completed</u> form to: <u>council@logan.qld.gov.au</u> or post to: PO Box 3226, Logan City DC Qld 4114.

Upon receipt of your information, Council's Parks Branch will assess your application. Some of the assessment criteria involve the desired park/s, times, possible effect upon other park users due to timeframes requested. If your application is approved, a permit will be sent in the mail to the provided postal address.

Should you have any further queries, please do not hesitate to contact Council's Parks Business Support Team on (07) 3412 3412.

Information required

Registered Business Name:):	
Company Trading Name: (if different from above)		
Australian Business Numbe (Business that the permitted	er: d activity is to be carried out)	
Contact First Name:		
Contact Surname:		
Contact Number: Phone:		Mobile:
Email Address:		
Postal Address:		

Privacy collection notice: Council collects personal information in order to provide services and information. It may be used to update records, contact you about Council businesses and can only be accessed by Councillors, employees and authorised contractors. All information is handled in accordance with Council's Privacy Policy and Procedure. Visit logan.qld.go.au/privacy



Please attach the	following documentation with your application:		
☐ Copies of Fir	st Aid Qualifications		
☐ Copies of Ap	Copies of Applicable Qualifications of ALL instructors to instruct the activities		
☐ Copy of Curr	Copy of Current Public Liability Insurance, the copy must be for a minimum of \$20,000,000		
Risk Manage	ement Plan		
☐ Current work	Current working with children Blue Card expiry date:		
(if working w	ith anyone under 18 years of age)		
☐ A plan or ma	p to indicate the area you require:		
Details of A	ctivities to be undertaken		
Nature of activities	S:		
Park/s:			
Quantity expected	:		
(please provide the	e highest number for each session including the Personal Trainer)		
Days or Dates:	to:		
Times:	to:		
*Example Dates:	Monday to: Friday		
*Example Times:	16.30 to: 18.30		
Schedule of propo	sed fees and charges for clients / customers:		
Any requirements	for sound amplification:		

