**ANNEX – SOL·LICITUD D’ÚS REGULAR D’EQUIPAMENTS CULTURALS MUNICIPALS**

**TEMPORADA 2023-2024**

*CAL OMPLIR AQUEST ANNEX PER A CADASCUNA DELS ESPAIS D’EQUIPAMENTS CULTURALS SOL·LICITATS*

**DADES DEL SOL·LICITANT***(cal que les dades de la persona representant que constin en la sol·licitud, siguin les de la persona que signa la instància electrònica)*

Entitat: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Persona sol·licitant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Càrrec: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telèfon: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Correu electrònic: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ESPAI CULTURAL SOL·LICITAT:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PERÍODE D’US SOL·LICITAT:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**BREU DESCRIPCIÓ DE L’ACTIVITAT A REALITZAR:**

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**BREU DESCRIPCIÓ DE LES QUOTES DE PARTICIPACIÓ A L’ACTIVITAT**

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**RESUM DEL MATERIAL A UTILITZAR**

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**RESUM DELS USUARIS QUE PARTICIPEN EN L’ACTIVITAT**

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| --- | --- | --- | --- | --- |
| **Grup d’activitat** | **Nombre de participants** | **Nombre de sessions setmanals** | **Durada de la sessió** | **Edat dels participants** |
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Diferenciar cada grup o equip en files diferents (encara que siguin de la mateixa categoria)

**PERSONAL RESPONSABLE DE CADA GRUP d’ACTIVITAT DE L’ENTITAT**

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| **Nom i Cognoms** | **Càrrec** | **Grup d’activitat** |
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**PERSONAL DE L’ENTITAT RESPONSABLE DE L’ESPAI CULTURAL DURANT L’HORARI D’ÚS CEDIT**

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| --- | --- |
| **Nom i cognoms** | **Horari setmanal** |
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**RELACIÓ D’ESDEVENIMENTS PUNTUALS O D’ACTIVITATS EXTRAORDINÀRIES DE L’ENTITAT DURANT LA TEMPORADA**

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| **Nom de l’esdeveniment o de l’activitat** | **Espai d’activitat** | **Data d’activitat** |
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**DADES BÀSIQUES ASSEGURANCES DE RESPONSABILITAT CIVIL I D’ACCIDENTS**

(cal adjuntar còpia de la pòlissa i del rebut de pagament que n’acrediti la vigència)

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| **ASSEGURANÇA DE RESPONSABILITAT CIVIL** | |
| Nom de la companyia |  |
| Núm. de pòlissa |  |
| **ASSEGURANÇA D’ACCIDENTS** | |
| Nom de la companyia |  |
| Núm. de pòlissa |  |

Declaro que són certes les dades incloses en aquesta sol·licitud.

**HORARIS D’ÚS SOL·LICITATS PER A LA REALITZACIÓ DE L’ACTIVITAT DESCRITA**

Cal adjuntar quadres d’horaris corresponents als espais culturals sol·licitats en els que s’hauran de detallar els grups d’activitat per franges horàries i els espais d’ús de cada grup d’activitat. Cal que l’entitat sol·licitant informi de **l’edat dels participants en cada grup**. També cal que indiqui amb detall en el quadre **l’horari, la durada i el nombre de les sessions setmanals** de cada grup.

**QUADRANT D’HORARIS DE L’ACTIVITAT GENERAL DE L’ENTITAT CULTURAL**

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| 11 a 12 |  |  |  |  |  |  |  |
| 12 a 13 |  |  |  |  |  |  |  |
| 13 a 14 |  |  |  |  |  |  |  |
| 14 a 15 |  |  |  |  |  |  |  |
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| 17 a 17:30 |  |  |  |  |  |  |  |
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| 22 a 22:30 |  |  |  |  |  |  |  |
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| 23 a 23:30 |  |  |  |  |  |  |  |

Aquest quadre és per a indicar l’horari general de l’entitat.

Cal fer ús dels quadrants de cadascuna dels espais culturals sol·licitats per a indicar els horaris assignats a cada grup d’activitat.

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| **SALA BLAVA (Espai Tolrà)** | | | |  |  |  |  |
| **HORARIS D'ÚS SOL·LICITATS** | | | |  |  |  |  |
|  | **Dilluns** | **Dimarts** | **Dimecres** | **Dijous** | **Divendres** | **Dissabte** | **Diumenge** |
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| **SALA DE PLENS (antic Ajuntament carrer Major)** | | | | | | | |
| **HORARIS D'ÚS SOL·LICITATS** | | | |  |  |  |  |
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| **SALA D’ALCALDIA (antic Ajuntament carrer Major)** | | | | | | | |
| **HORARIS D'ÚS SOL·LICITATS** | | | |  |  |  |  |
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