



SUMMARY COURT
(Licensing)
FALKLAND ISLANDS

Application for a Children's Certificate

Section 66A and Schedule 7 Licensing Ordinance 1994

Full name of applicant				
Name of licensee				
Name of licensed premises				
Address of licensed premises				
Days of the week & times for which certificate is sought	<input type="checkbox"/>	Monday		
	<input type="checkbox"/>	Tuesday		
	<input type="checkbox"/>	Wednesday		
	<input type="checkbox"/>	Thursday		
	<input type="checkbox"/>	Friday		
	<input type="checkbox"/>	Saturday		
	<input type="checkbox"/>	Sunday		
Is the area to be covered by the children's certificate a suitable environment for under 18 year olds?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
How will the area covered by the children's certificate be designated?				
Will non-alcoholic beverages be available?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Will meals be available?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Declaration

I declare that the particulars given about are true and that I am the holder of a Justices On Licence and I have included copies of the plan outlining the proposed area to be covered by the children's certificate.

I apply for a children's certificate as specified above.

Signed:

Dated: