



VICTORIA POLICE

PARTYSAFE REGISTRATION FORM

The following information will enable us to provide a more effective response, if required, and ensure a safer and more enjoyable night for everyone.

Please complete all sections and return this form to your local police station prior to the date of your party.

Party details

Party date: _____

Start time: _____

Finish time: _____

Predominant age of guests: _____

Number of guests attending: _____

Adult supervisor present: ☐ Yes ☐ No

If yes, number of adults supervising: _____

What is the occasion (birthday, after party, etc): _____

Will the neighbours be notified: ☐ Verbal ☐ In writing ☐ Not notified

Will there be alcohol: ☐ Yes ☐ No

Will BYO alcohol be allowed: ☐ Yes ☐ No

Is it a licensed premises: ☐ Yes ☐ No

Will there be hired or private security: ☐ Yes ☐ No

Party location

Street address: _____

Suburb: _____

Postcode: _____

Venue or type of premises: ☐ Licensed venue ☐ Hall ☐ Restaurant
☐ Private house ☐ Park

Contact details

Host contact name: _____

Host contact number: _____

Host contact email: _____

Other contact during party: _____

Venue contact number: _____

Security contact number: _____

☐ I do not want to be contacted by Victoria Police after this party, to participate in evaluation of the Partysafe Program.

The information contained in this Partysafe registration form will be kept in strict confidence and used only for the express purpose of the Partysafe project.