

REQUEST FOR USE OF FACILITIES

Name _____ Date of Application _____

Organization _____ Date of Use _____

Address _____

Phone No. _____

Name/Phone No. of Person in Charge _____

Building & Area of Building Wanted _____

Time of Use to Begin at: _____ Time of Use to End at: _____

Reason for usage: _____

Facilities are to be left exactly the way they are found. Costs associated with any clean up will be billed to the responsible party, including but not limited to custodial wages.

All doors should be locked and all lights should be off.

(Please see attached Board Policy for Facility Use.)

To be completed by Building Principal or their designee:

Fee applicable _____

Approved by _____

Maintenance staff notified _____

Adopted: April 10, 2002 Reviewed: June 19, 2013 Revised: _____