

REQUEST FOR USE OF SCHOOL FACILITIES

TO: Principal: \_\_\_\_\_ School: \_\_\_\_\_

We seek permission to use the following school facilities:

School Building: \_\_\_\_\_ Room(s): \_\_\_\_\_

If for a season or extended period, state the beginning and ending dates.

<u>Day</u>	<u>Date</u>	<u>From</u>	<u>Hours</u>	<u>To</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Purpose: \_\_\_\_\_

Name of Adult in Charge: \_\_\_\_\_

We wish entrance to the building at: \_\_\_\_\_ (time)

We will vacate the building by: \_\_\_\_\_ (time)

We (will) (will not) charge an admission fee. We expect an attendance of approximately \_\_\_\_\_ persons.

We require use of the following, and understand there is a charge for such use:

_____	Stage	_____	Speaker's stand
_____	Special Lighting	_____	Ticket Table & Chairs (no.)
_____	Piano (on stage) (on floor)	_____	Gymnasium showers
_____	Projector	_____	Folding chairs (no.)
		_____	Large Folding Tables (no.)

Additional requests or comments: \_\_\_\_\_

\_\_\_\_\_

It is understood that School District activities have preference over outside activities in using the school buildings and this request is subject to cancellation if the requested facility is needed for a school activity.

If this permission is granted, we agree to be responsible for any accidents or injuries sustained by any person attending or participating in the program or activity for which we may use the above-mentioned school facilities, and to be responsible for replacement in case of any damage or loss incurred. Further, in accordance with State requirements and Board policy, we agree that there shall be no use of tobacco or controlled substances in the school building.

\_\_\_\_\_  
Name of Organization/person/group

By: \_\_\_\_\_  
Signature

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

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**THIS SPACE FOR DISTRICT USE**

This request has been approved and granted.

RENTAL \$ \_\_\_\_\_ OTHER FEES \$ \_\_\_\_\_

All rental and other fees are payable in advance and checks are to be made payable to \_\_\_\_\_.

This approval is subject to certain other conditions as set forth below:

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

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This request cannot be granted for the following reason(s):

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date