

BUILDING USAGE REQUEST FORM

Revised 9/8/2009

Please Print

Part I, II and III are to be completed. A copy of the certificate of liability insurance must be attached to the building usage form.

Part I (USAGE REQUEST)

*All information **MUST** be provided to assure correct completion of a contract, etc.

BUILDING:

CTR HS MJR/SR HS CTR MS TODD LANE CENTER GRANGE CJ MANGIN

REQUEST BY:

NAME OF ORGANIZATION _____

CONTACT PERSON _____

ADDRESS (city, state and zip code) _____

DATE(S) OF THIS USAGE:

Beginning date _____

(include day of week)

Ending date _____

(include day of week)

TIMES OF THIS USAGE:

Arrival time _____ Departure time _____

EXACT AREA(S) TO BE USED:

PURPOSE OF THIS USAGE:

GENERAL INFORMATION: Approximate number of people expected to attend: _____

Is a custodian needed? Yes No If "yes", list specific date(s) and time(s) needed.

Is any special equipment, area, or assistance needed related to this usage?

Yes No If "yes", _____

Is there admission being charged during this usage? Yes No

PART II (APPROVALS)

BUILDING PRINCIPAL _____ Date _____

PART III CHARGES

Group Classification _____ Rental Charge _____ Custodial Charge _____ Other _____

TOTAL _____

PART IV BOARD ACTION

APPROVED DENIED BOARD SECRETARY _____

COPIES TO: Contact Person Business Office Building Principal Maintenance Supervisor