

REQUEST FOR RENTAL/USE OF FACILITIES APPLICATION

Gallatin Co Relay for Life/Springtime of Hope
NAME OF REQUESTING ORGANIZATION

Auditorium and hallway by gym
AREA OF THE FACILITY

Yolanda Gould
PERSON WHO WILL BE PRESENT AND
SUPERVISING THE ACTIVITY

May 11th night for set up (5-11^{PM}) and May 12 for event
DATE(S) THE FACILITY IS REQUIRED
FROM 7A A.M., P.M. TO 6P A.M. (P.M.)
PLEASE CIRCLE A.M. OR P.M.

THE REQUEST AREA(S) OF THE FACILITY WILL BE USED FOR THE FOLLOWING ACTIVITIES:

Springtime of Hope Pageant to raise money for Gallatin Co Relay for Life

have used facility past 2 yrs for the event

Is the organization planning to conduct sales on school premises? yes food for lunch and vendors will be set up up

SCHOOL EQUIPMENT TO BE USED: Auditorium Sound equipment (always check with Mr Howard) and a few available tables

APPROXIMATE #OF PERSONS: 2-300

* I request waiver of the rental fee.

* I request waiver of the charge for custodian. (Brandon Beall said he would be happy to help us this yr)

Fee Schedule

The organization agrees to pay the applicable fee(s) for the use of District facilities

	# of Employees Required	# of Hours	Hourly Rate (Overtime at 1.5 times)	Total
Custodians				
Food Service Empl				
Other				

Facility/Equipment Fee \$ _____
Insurance Cost \$ _____

Personnel Cost \$ _____
Total Cost \$ _____

I have read the Rules and Regulations for Community Use of School Facilities and agree on behalf of the requesting organization to assume personal responsibility for the proper use of the above named areas of the facility.

Yolanda J. Gould
SIGNATURE OF PERSON MAKING
REQUEST ON BEHALF OF THE
ORGANIZATION

P.O. Box 107
Address Warsaw KY 40395

11/30/2011 Home 859-904-0201 Work 502-732-9065
DATE TELEPHONE

In the event school is closed due to weather conditions, all scheduled activities, with the exception of dinner meetings, will be cancelled and opportunity to reschedule or refund rental fee(s) will be made.

AREA BELOW FOR OFFICIAL USE ONLY

MARTHA SEBRING for Caf  Requests

DATE

JON JONES/LINDA EDMONDSON for Gym Requests

DATE

KEITH HOWARD for Auditorium Requests (High School)

DATE

PRINCIPAL
APPROVED
DISAPPROVED

DATE

SUPERINTENDENT
APPROVED
DISAPPROVED

DATE

BOARD CHAIRPERSON

Board Meeting Date