

# REQUEST FOR RENTAL/USE OF FACILITIES APPLICATION

Warsaw Pentecostal Church

NAME OF REQUESTING ORGANIZATION

Mark Sanders

PERSON WHO WILL BE PRESENT AND  
SUPERVISING THE ACTIVITY

Gym - Auditorium

AREA OF THE FACILITY

Fri Sept 14th 6-10 p.m.

DATE(S) THE FACILITY IS REQUIRED  
FROM \_\_\_\_ A.M., P.M. TO \_\_\_\_ 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:

Church Service

Is the organization planning to conduct sales on school premises? No

SCHOOL EQUIPMENT TO BE USED: Sound System

APPROXIMATE #OF PERSONS: \_\_\_\_\_

☒ I request waiver of the rental fee.

☒ I request waiver of the charge for custodian. - Will pay for custodian

## 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.

Rev. Mark W. Sanders Mark W. Sanders

SIGNATURE OF PERSON MAKING  
REQUEST ON BEHALF OF THE  
ORGANIZATION

Address

PO Box 290  
Warsaw, KY 41095

3/14/12  
DATE

Home 502 525 1388 Work \_\_\_\_\_  
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 Café Requests

\_\_\_\_\_  
DATE

\_\_\_\_\_  
JON JONES/LINDA EDMONDSON for Gym Requests

\_\_\_\_\_  
DATE

\_\_\_\_\_  
KEITH HOWARD for Auditorium Requests (High School)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINCIPAL

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SUPERINTENDENT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPROVED  
\_\_\_\_\_  
DISAPPROVED

\_\_\_\_\_  
APPROVED  
\_\_\_\_\_  
DISAPPROVED

\_\_\_\_\_  
BOARD CHAIRPERSON

\_\_\_\_\_  
Board Meeting Date