REQUEST FOR RENTAL/USE OF FACILITIES APPLICATION

Varsity Cheerleading
NAME OF REQUESTING ORGANIZATION
Elementary gym
AREA OF THE FACILITY

Michelle Lawrence/Caroline Benson
PERSON SUPERVISING ACTIVITY

June 10 and 11 2013
DATE(S) REQUESTED
TIME: 10 am -2pm
(Please specify AM or PM)

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

Cheerleading Camp

Is the organization planning to conduct sales on school premises?NO SCHOOL EQUIPMENT TO BE USED: none

APPROXIMATE #OF PERSONS:

☑ I request waiver of the rental fee. Please X if applicable

⊠ I request waiver of the charge for custodian. Please X if applicable

Fee Schedule

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

Facility/Equipment Fee \$\frac{\text{Click here to enter text.}}{\text{Insurance Cost \$\text{Click here to enter text.}}}

Personnel Cost \$ Click here to enter text.

Total Cost \$Click here to enter text.

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.

Michelle Lawrence/Caroline Benson

SIGNATURE OF PERSON MAKING REQUEST ON BEHALF OF THE ORGANIZATION Click here to enter text.

Address PHONE

Home enter text.

Cell 8593079150

DATE 4-8-13

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

Click here to enter text.

MARTHA SEBRING for Café Requests
Requests

Click here to enter text.
KEITH HOWARD for Auditorium Requests

Type signature here
SUPERINTENDENT

Jon Jones
JON JONES/LINDA EDMONDSON for Gym

Joe Wright
PRINCIPAL

BOARD CHAIR

DATE