

**REQUEST FOR RENTAL/USE OF FACILITIES APPLICATION**American Cancer Society

NAME OF REQUESTING ORGANIZATION

Gallatin County High School Gym

AREA OF THE FACILITY

Jodi Dunavan & Yolanda Gould

PERSON SUPERVISING ACTIVITY

May 18<sup>th</sup>-19<sup>th</sup>, 2013

DATE(S) REQUESTED

TIME: 6:00pm-6:00am

(Please specify AM or PM)

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

Relay for Life of Gallatin County

Is the organization planning to conduct sales on school premises? YES

SCHOOL EQUIPMENT TO BE USED: n/aAPPROXIMATE #OF PERSONS: 150☒ I request waiver of the rental fee. Please X if applicable☒ I request waiver of the charge for custodian. Please X if applicableFee Schedule

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

Facility/Equipment Fee \$Click here to enter text.Personnel Cost \$ Click here to enter text.Insurance 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.

Jodi DunavanSIGNATURE OF PERSON MAKING  
REQUEST ON BEHALF OF THE  
ORGANIZATION297 Buttermilk Pike, Fort Mitchell, KY 41017

Address

PHONE

Home 859-372-7883 Cell 502-487-0607DATE May 17<sup>th</sup>, 2013*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  
RequestsClick here to enter text.Jon Jones  
JON JONES/LINDA EDMONDSON for GymClick here to enter text.

KEITH HOWARD for Auditorium Requests

Click here to enter text.Rogin Booth  
PRINCIPALType signature here

SUPERINTENDENT

BOARD CHAIR

DATE

Jairish ✓  
Murray ✓