REQUEST FOR RENTAL/USE OF FACILITIES APPLICATION

Kentucky Bluebelles			High School Huditorium AREA OF THE FACILITY		
NAME OF REQUESTING ORGANIZATION			AREA OF T	HE FACILITY	
Chloe B.	Roberts		Satura	lay, February	7.2015
PERSON WHO WILL BE PRESENT AND			Saturday, February 7, 2015 DATE(S) THE FACILITY IS REQUIRED		
UPERVISING THE	E ACTIVITY			9A.M., P.M . TO 9:00 A RCLE A.M. OR P.M.	.M.,P.M.)
HE REQUEST AR	EA(S) OF THE FACILIT	ry will be use Lelebration	D FOR THE FOLLOWING	ACTIVITIES:	
s the organization pl	anning to conduct sales of	on school premises	Yes		
CHOOL EQUIPME	ENT TO BE USED:	und and Li	ghting		
.PPROXIMATE #C	11	5-100			
✓ I reques	t waiver of the rental fee.				
I reque	st waiver of the charge fo	r custodian.			
Fee Schedule The organization agre	ees to pay the applicable	fee(s) for the use o	f District facilities		
	# of Employees Requir	ed # of Hours	Hourly Rate (Overtime	at 1.5 times) Total	
Custodians					
ood Service Empl Other		•			
	'ee \$	Perso Total	onnel Cost \$ Cost \$		
have read the Rules ssume personal resp	onsibility for the proper	use of the above na	nool Facilities and agree on med areas of the facility. 895 Hwy 1996 ess Janau Ty		organization to
EQUEST ON BEH RGANIZATION	ALF OF THE				<u> </u>
Jan. 15, 20		869-814- PHONE	3345 Cell 50	12-645-326	P9
			uled activities, with the exce	ption of dinner meetings	s, will be cance
nd opportunity to re	schedule or refund renta A		^{e.} R OFFICIAL USE ONLY		
MARTHA SEBRING	For Café Requests		DATE		
ON JONES/LINDA	EDMONDSON for Gym	n Requests	DATE		
KILLA	Valand		1-16-15		
EITH HOWARD fo	or Auditorium Réquests (High School)	DATE		
RINCIPAL		DATE	SUPERINTENDENT		DATE
APPROVEI		DATE	APPROVED	0	DATE
		DATE		D	DATE
APPROVEI		DATE	APPROVED	D	DATE