REQUEST FOR RENTAL/USE OF FACILITIES APPLICATION

Gallatin County Middle School Cheerleaders
NAME OF REQUESTING ORGANIZATION
Middle School Cafeteria
AREA OF THE FACILITY

Buddie Brockman

PERSON SUPERVISING ACTIVITY

M, T, W, Th, F April 2015- April 2016

DATE(S) REQUESTED
TIME: 3:15 to 6:00 PM
(Please specify AM or PM

	(Please specify AM or PM)	
THE REQUEST AREA(S) OF THE FACILITY WIL <u>Cheerleading practice</u> Is the organization planning to conduct sales on school SCHOOL EQUIPMENT TO BE USED: <u>Cheerleading</u> APPROXIMATE #OF PERSONS: <u>20</u>	ol premises?NO	OWING ACTIVITIES:
☐ I request waiver of the rental fee. Please X if appli	icable	
☐ I request waiver of the charge for custodian. Pleas	se X if applicable	
<u>Fee Schedule</u> The organization agrees to pay the applicable fee(s) fo	or the use of District facilities	
Facility/Equipment Fee \$ <u>Click here to enter text.</u> Insurance Cost \$ <u>Click here to enter text.</u>	Personnel Cost \$ Click here Total Cost \$ Click here to en	Particular de la companya del companya del companya de la companya
I have read the Rules and Regulations for Community requesting organization to assume personal responsible facility.		
Buddie Brockman SIGNATURE OF PERSON MAKING REQUEST ON BEHALF OF THE ORGANIZATION	PO BOX 1197 Warsaw KY 4 Address PHONE Home 8592505405 Cel	1095 l <u>text.</u>
DATE <u>1/28/15</u> In the event school is closed due to weather conditions meetings, will be cancelled and opportunity to resched AREA BELOW FO F		
<u>Martha Sebring</u> MARTHA SEBRING for Café Requests Requests	Click here to enter text. JON JONES/LINDA EDMONDSON for Gym	
Click here to enter text. KEITH HOWARD for Auditorium Requests	<u>Curt Bieger</u> PRINCIPAL	
Type signature here SUPERINTENDENT	BOARD CHAIR	DATE