

GALLATIN COUNTY BOARD OF EDUCATION
600 MAIN STREET, P. O. BOX 147
WARSAW, KY 41095
Phone (859) 567-2828, Fax (859) 567-4528

REQUEST FOR RENTAL/USE OF FACILITIES APPLICATION

Yearbook
NAME OF REQUESTING ORGANIZATION
Sarah Webster
PERSON WHO WILL BE PRESENT AND
SUPERVISING THE ACTIVITY

Cafeteria
AREA OF THE FACILITY
4-26-19
DATE(S) THE FACILITY IS REQUIRED
FROM 4 a.m., 6 p.m. TO 11 a.m., 6 p.m.
(Please circle a.m. or p.m.)

IF THIS IS A CONTINUING REQUEST, INDICATE THE DURATION BELOW:

Beginning: N/A and continuing through: _____

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

Game Night for community

SCHOOL EQUIPMENT TO BE USED:

N/A

APPROXIMATE # OF PERSONS: 100 approx

☒ I request waiver of the rental fee.
☒ I request waiver of the charge for custodian.

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.

Sarah Webster
SIGNATURE OF PERSON MAKING
REQUEST ON BEHALF OF THE
ORGANIZATION

YCHS yearbook advisor
Address

4/8/19
DATE

Home _____ Work _____
TELEPHONE

AREA BELOW FOR OFFICIAL USE ONLY

BOARD CHAIRMAN
[Signature]
PRINCIPAL'S SIGNATURE
APPROVED
DISAPPROVED

DATE
4/11/19
DATE

SUPERINTENDENT'S SIGNATURE
APPROVED
DISAPPROVED

DATE

STIPULATIONS: _____

RETURN TO THE OFFICE OF THE SUPERINTENDENT, ADDRESS ABOVE

SBDm 4/11/19 [Signature] Board Chair