



MPHS

Facility Request Form



Name: _____

Today's Date: _____

FACILITY NEEDED:

Cafeteria

Gymnasium

Media Center

Other (Specify) _____

Date of Event: _____

Brief Description of Activity or Event:

List Any Special Equipment Needed:

1. _____
2. _____
3. _____
4. _____

Signature of Sponsor: _____

Date: _____

Do Not Write Below This Line

APPROVED: _____

DECLINED (Reason): _____

Administrator: _____

DATE: _____