

APPLICATION FOR USE OF SCHOOL FACILITIES

SPECIAL NOTE: Only adults (21 years or older) may participate in an adult activity. Failure to comply with this rule will mean a forfeit of this privilege.

Name of Organization: _____

Person in Charge of this Activity: _____

Address: _____

Phone Number: _____

Description of this Activity: _____

Room(s), Facility Requested: _____

School Equipment Required: _____

Date(s) of Use: _____

Start Time: _____

Departure Time: _____

Current Liability Insurance Certificate: Attached _____

On file with school _____

Signature of Person in Charge

Signature, Chief School Administrator