

BUILDING USE AND EVENTS

DIRECTIONS:

STEP 1: Fill out all information below.

STEP 2: Return ORIGINAL to Office.

Your Name _____ Today's Date _____

Event _____ Date(s) _____

Start Time _____ End Time _____

☐ Verified date(s) open on Master Calendar [Do **NOT** Enter on Master Calendar – Office will do]

Location(s) Needed

Signatures [You MUST get signatures from the “owners” of each location]

☐ Gym (Old) PE Dept _____

Lunch _____

☐ Gym (New) PE Dept _____

☐ Library Library _____

☐ Kitchen Lunch _____

☐ Classroom Room (List) _____ Teacher Signature _____

☐ Classroom Room (List) _____ Teacher Signature _____

☐ Classroom Room (List) _____ Teacher Signature _____

☐ Other Room _____ Signature _____

Those Affected/Need to Know (check all that apply)

☐ Principal

☐ Custodian

☐ Roberta

☐ Food Service

☐ PE

☐ Library

☐ Music

☐ Computer Lab

☐ Classroom(s): _____

☐ Recess: _____

☐ Other: _____

Setup:

Help Needed For Setting Up? Yes ____ No ____ Who? _____ Set Up Time _____

Equipment Needed? _____

Do you need tables from the district? Yes ____ No ____

If so, who will order? You ____ Pat ____ [If you order them make sure to give Pat a copy of the paperwork]

IN CASE OF INCLEMENT WEATHER OR NO NIGHT CUSTODIAN, THE AFTERNOON AND EVENING EVENTS WILL BE CANCELLED. PHONE # FOR CONTACT PERSON _____

For Office Use Only

Added to Master Calendar _____ [Initial when done]

Copies made and distributed to all those listed above ____ [Initial when done]