

Easton, Redding, Region #9
Application/Permit for Use of School Facilities/Fields/Grounds/Equipment
 Submit completed form, documents & fees to Principal/JBHS Director of Athletics

Individual Submitting Request:		Name of Organization:		Name of Person Responsible for Paying Bills & Charges:	
Address:		Address:		Address:	
Telephone: ()		Telephone: ()		Telephone: ()	
		Profit or Non-Profit Status:		Relationship to Individual/Organization:	
Describe Activity Planned:					
Name of Program Director:		Name of Activity Advisor/Coach:		Name of Corridor Supervisor:	
Name of School Requested:		Rooms/Areas/Fields Requested:		Date(s) Requested:	
				Hours of Use (including setup/cleanup):	
Estimated Attendance:		Estimated Number of Cars to be parked on school property:		Is activity open to general public? <input type="checkbox"/> yes <input type="checkbox"/> no	
Program/Registration Fee and/or Ticket Price and/or Donation Requested:					
Evidence the \$1,000,000 insurance coverage required by the Board of Education has been secured by the applicant and copied to the school system: <input type="checkbox"/> yes <input type="checkbox"/> no describe:		Evidence the applicant has obtained any required license and/or permit for the activity: <input type="checkbox"/> yes <input type="checkbox"/> no describe:		Payment of any required security deposit(s): <input type="checkbox"/> yes <input type="checkbox"/> no amount: \$	
				Payment of any required rental/use fees: <input type="checkbox"/> yes <input type="checkbox"/> no amount: \$	

I (we) have read the Policies and Regulations promulgated by the Easton, Redding or Region #9 Board of Education regarding the use of the school facilities and, as duly authorized agent for this organization/individual, I (we) agree to abide by them. I (we) take particular note that all five campuses are drug, alcohol, tobacco and smoke free.

Signature of Applicant

Date of Application

The bottom part of this form is to be completed by a school official:

Police required for activity: <input type="checkbox"/> yes <input type="checkbox"/> no # required: _____ Custodian(s) required for activity: <input type="checkbox"/> yes <input type="checkbox"/> no # required: _____ Kitchen staff required for activity: <input type="checkbox"/> yes <input type="checkbox"/> no # required: _____ Other staff required for activity: <input type="checkbox"/> yes <input type="checkbox"/> no # required: _____ Who is required: _____	_____ Date Application Received _____ Received by _____ Date Application Reviewed Application Approved: <input type="checkbox"/> yes <input type="checkbox"/> no _____ Signature of School Official:	Facility available on above date(s)/time(s): <input type="checkbox"/> yes <input type="checkbox"/> no Permission to use school equipment granted: <input type="checkbox"/> yes <input type="checkbox"/> no <i>(requested equipment list attached)</i> Space has been reserved: <input type="checkbox"/> yes <input type="checkbox"/> no Rooms/Areas reserved: _____
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Easton, Redding, Region #9

Additional Information for Use of School Facilities/Fields/Grounds/Equipment

You may submit this form, along with your completed application, to Building Principal/Director of Athletics.

Individual Submitting Request:	Name of Organization:	Name of Person Responsible for Paying Bills & Charges:
Activity:		
Describe or draw a sketch of any special set up needs your activity requires:	List any furniture/equipment requested: <i>(security deposit(s) may be required)</i>	
Other comments/requests/sketches:	<i>This box is for notes by the determining school official:</i>	