



Parks, Recreation & Culture

Request for School Facilities		
Date:		
Name of Organization / Group:		
Address:		
Fax:	Email:	
Association Contact:	Telephone(s): Home: Work:	
On Site Supervisor:	Telephone(s): Home: Work:	
Facility Requested		
Name of School:	Room:	
Start Date:	End Date:	
Day/ Days of Week:	Time: From: To:	
Function:		
# of Participants	Adult <input type="checkbox"/>	
	Youth <input type="checkbox"/>	
# of chairs:	# of tables:	Set up required:
TO BE COMPLETED BY SCHOOL DISTRICT 75		
Janitor required outside of regular hours? <input type="checkbox"/> yes <input type="checkbox"/> no		
Hours required:	Total charge:	Additional Charges:
Approved by:		
Signature:		