

RSU #2 FACILITY USE APPLICATION FORM

Please print when completing this form.

1. Date of Application: _____

2. Organization/Group/Individual:

A. Name: _____

B. Contact Person: _____

C. Mailing: _____

D. Telephone No. [HOME]: _____
[WORK]: _____

E. RSU Employee present throughout the event: _____

3. Facility Requested: _____

Date(s) Requested: _____
[INCLUDE START AND END DATES AND DAY(S) OF WEEK]

Time Requested: _____
[INCLUDE START AND END]

4. Details of use:

A. General Description: _____

B. Number of Participants: _____ Number of Spectators: _____

C. Refreshments: YES _____ NO _____ IF YES, DESCRIBE:

NOTE: Organizations are encouraged to use RSU #2 food services for provision of food and refreshments. Contact the building principal for specifics.

D. Special equipment/service requested: lights, chairs, tables, sound system, scoreboard, music equipment, etc.:

5. Admission charge/other fees: YES _____ NO _____ If YES, describe charge of fee and explain where this money goes and for what purpose:

Is this a certified, tax exempt, non-profit organization? YES _____ NO _____

501 (3)(C)? YES _____ NO _____

Anticipated total revenues from fees: _____

6. Proof of insurance attached: YES _____ NO _____ If NO, explain reason it is not needed:

7. Routing of Request:

Building Principal's comments/conditions of use:

APPROVED: _____ DENIED: _____

DATE: _____

[BUILDING PRINCIPAL'S SIGNATURE]

Athletic Director's comments/conditions of use:

APPROVED: _____ DENIED: _____ NOT APPLICABLE: _____

DATE: _____

[ATHLETIC DIRECTOR'S SIGNATURE if applicable]

Food Service Director's comments/conditions of use:

APPROVED: _____ DENIED: _____ NOT APPLICABLE: _____

DATE: _____

[FOOD SERVICE DIRECTOR'S SIGNATURE if applicable]

Director of Maintenance of Buildings and Grounds' comments/conditions of use:

APPROVED: _____ DENIED: _____

DATE: _____

[DIRECTOR OF MAINTENANCE]

Superintendent's comments/conditions of use:

APPROVED: _____ DENIED: _____

DATE: _____

[SUPERINTENDENT'S SIGNATURE]