



St. Landry Parish
Child Nutrition Program
Special Event Form
Kitchen Rental



Date: _____

Start Time: _____ End Time: _____ (Includes set-up and clean-up)

Time of Event: _____ Number of hours needed in facility _____

Date of Event: _____

Name of Event: _____

Description of Event: _____

Group Sponsoring Event: _____

Group Contact Name: _____

Group Contact Phone Number: _____

Please read the Policies and Agreement for use of cafeteria facilities:

All requests need to be submitted at least 2 weeks prior to the event.

Note: Use of any food service equipment constitutes having a food service employee present.

What is needed to have an event in the kitchen?

1. Trained cafeteria employee (Paid or Volunteer)
2. Liability Insurance (Schools sponsored events are exempt.)
3. Completed Special Events request form
4. Signed Policies and Agreement for use of cafeteria facilities

What is needed to have an event in the dining area?

1. Completed Special Events request form submitted to the Child Nutrition Department.
2. Liability Insurance (Schools sponsored events are exempt.)
3. Signed Policies and Agreement submitted to Child Nutrition Department.

Group's Representative

School Principal

Supervisor of Child Nutrition

Assistant Superintendent of Operations

*Child Nutrition
White Copy*

*Assistant Superintendent
Yellow Copy*

*Principal
Pink Copy*

*Organization
Gold Copy*

Official Use Only

Rental Fee: _____

Rate: \$25.00 for Minimum of two (2) hours
\$10.00 for each additional hour

Date Received

Employee Rate: \$10.00/hr

Total Hours _____