

**Bangor School District
Facility Key Check Out**

Key(s): _____

Name: _____ Phone: _____

Email: _____

Representing: _____

Estimated date key will be returned: _____

Check Out Date: _____ Check In Date: _____

Bangor School District Key Sign-out Agreement

- 1. The key(s) will be used to access the facility ONLY during pre-scheduled times (see facility request or <http://bangorwius.tandem.com>).**
- 2. The key(s) will not be shared with anyone else or duplicated.**
- 3. If the key(s) are lost, the above-signed is responsible (may include the cost of re-keying doors).**
- 4. The below-signed will be responsible for securing the facility when leaving (making sure everyone is out, lights are off and facility is locked).**
- 5. The key(s) will be returned to the District WITHIN ONE WEEK following the last scheduled facility use of the school year.**

Signature: _____