



ACTIVITIES

Please complete the following form to be approved, scheduled, and filed with the building administration. This form should be turned in a minimum of **two weeks prior** to the requested activity. All requests should be turned in **no later than April 1** of the school year. Activities will be scheduled on a first come, first serve basis.

Activity _____

Group/Organization _____

Date and Time of Activity _____

Date Request Made _____

Purpose of the Activity _____

Names of Sponsors and Chaperones (Dances must have at least two teachers and one administrator. It is recommended that an off – duty policeman be hired for dances.)

Activity Approved: _____ Yes _____ No

Date Scheduled _____

Reason for not approving _____

Administrator's Signature