

Regional School Unit No. 34  
Facilities Use Request Form (10/2022)

Code: KF-E

Building Administrator

*“All groups shall have a custodian on site or other school employee as approved by the Superintendent when the facility is in use.”*

Who will be on site?

// Recommend      // Do Not Recommend

\_\_\_\_\_ Building Administrator      Date

Food Service Director

*“If kitchen facilities are used, a member of the food service staff or other school employee as approved by the Superintendent shall be on site when the kitchen is in use.”*

Who will be on site?

// Recommend      // Do Not Recommend

\_\_\_\_\_ Food Service Director      Date

Facilities Director

// Approved      // Not Approved

\_\_\_\_\_ Facilities Director      Date

Superintendent of Schools

// Approved      // Not Approved

\_\_\_\_\_ Superintendent of Schools      Date

SUMMARY OF ESTIMATED FEES/CHARGES:

Rental Fee      \$100.00 // Waived = \_\_\_\_\_

Incidental Cost      \$10.00 X \_\_\_\_\_ = \_\_\_\_\_

                                 \$25.00 X \_\_\_\_\_ = \_\_\_\_\_

Estimated Custodial Costs (@ \$35/hr) \_\_\_\_\_

Estimated Kitchen Costs (@20.00/hr) \_\_\_\_\_

Estimated Equipment Rental Costs: \_\_\_\_\_

TOTAL ESTIMATED COSTS:

Deposit Amount Required \_\_\_\_\_ Deposit Amount Rec'd \_\_\_\_\_

Rec'd by: \_\_\_\_\_ Date: \_\_\_\_\_

*For Office Use Only*

Amount Billed: \_\_\_\_\_

Date Billed: \_\_\_\_\_ Date Payment Received: \_\_\_\_\_

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Name of Group Making Request: \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Date(s)/Time(s) of Requested Use: \_\_\_\_\_

Description of Event: \_\_\_\_\_

Building / Facility/ Space Requested: \_\_\_\_\_

Required Set Up: \_\_\_\_\_

Required Equipment: \_\_\_\_\_

Kitchen Used?  YES  NO

(If yes, request must also go to the Food Service Director prior to submission to the Superintendent.)

I \_\_\_\_\_ representing \_\_\_\_\_  
have received, read and understand Regional School Unit #34 Policy KF Community Use of Schools, and I agree to all regulations, fees and charges as outlined in the policy.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date