

APPLICATION
USE OF SCHOOL FACILITIES

HARMONY TOWNSHIP BOARD OF EDUCATION

NAME OF ORGANIZATION _____ DATE _____

ADDRESS _____

DATE(S) REQUESTED _____ PURPOSE _____

TIME: From _____ to _____ Number of people to use facilities _____

FACILITIES DESIRED

____ All Purpose Room

____ Kitchen

____ Classroom(s)

____ Restrooms

____ Library

____ Stage

____ Front Lobby

____ Back Lobby

EQUIPMENT DESIRED

____ Chairs - # Needed _____

____ Microphone

____ Piano

____ Table(s) - # Needed _____

SCHOOL EQUIPMENT NEEDED

LIABILITY INSURANCE _____ POLICY# _____

The applicant has read, understands and accepts all conditions set forth under Board of Education Policy #1330 – USE OF SCHOOL FACILITIES

Signature of Organization Representative

Mailing Address

Telephone Number

Chief School Administrator's Recommendation

Signature – Chief School Administrator

____ Approved

____ Unapproved

____ No Fee

____ Amount of Fee

Copies to: _____ File
 _____ Organization
 _____ Custodian