Island Heights School District

Application For Use of Building Or Facilities

To insure reservation of the required date for the building or facilities, it is required that this application be submitted fifteen (15) days in advance. Any changes after this application has been approved and returned to the organization shall require direct communication with, and approval by, the Chief School Administrator.

Organization:	Date of Reque	Date of Request:				
Address:						
Contact Person:			Phone Number:			
Facility Requested:	Large Instructional Room		Equipment I	Equipment Needed:		
	Small Instructional Room (Chairs, Table			oles, etc.)		
	Field					
	Multi-Pur	pose Room				
	Classroom					
Will Admission Be Ch	arged: Yes	No Amou	nt:			
Number of Persons Expected in Building:						
Description of Activity	y:					
Month	<u>Date</u>	<u>Time</u>	<u>Month</u>	<u>Date</u>	<u>Time</u>	
Signature:			Telephone Numb			
Address:						
Approved By:	Disapproved By:					
Date:						

Custodial or Rental Fee-Per Meeting (To be paid 48 hours in advance of meeting)

APPLICATION FOR USE OF ISLAND HEIGHTS SCHOOL FACILITIES

Name of Organization					
Person in Charge					
AddressPhone Number					
Date Facilities Desired (List all Dates)					
Hours NeededTi	ime of Meeting or Activity				
Type of Activity Sponsored					
List below any special equipment that i	is needed for your activity:				
COPY OF CERTIFICATE OF INSUR	ANCE ATTACHED YES () NO ()				
Effective Dates of Insurance From:	To:				
	ion whose signature appears below agrees for the 10 of the Island Heights Board of Education for				
	DUCATION USE ONLY				
APPROVAL: GRANTED ()	NOT GRANTED ()				
Date of Board Meeting:					
Cost to the Organization:					
 Superintendent					