West Branch Community Schools
Facility Usage Request Form

The following facility would like to be used (*please circle facility).* **Forms need to be returned to Central Office.**

Elementary	**Middle School**	**High School**
Gym	Practice Gym	Competition Gym
All Purpose Room	Commons	Multi-use
Classroom	Classroom	Wrestling Room
Library	Library	Auditorium
Kitchen		Commons
		Classroom
		Library

for the purpose of:

_____

_____

1st choice: **from** _____ a.m. p.m. _____ *(Date)* **to** _____ a.m. p.m. _____ *(Date)* S M T W T F S *(circle day)*

2nd choice: **from** _____ a.m. p.m. _____ *(Date)* **to** _____ a.m. p.m. _____ *(Date)* S M T W T F S *(circle day)*

3rd choice: **from** _____ a.m. p.m. _____ *(Date)* **to** _____ a.m. p.m. _____ *(Date)* S M T W T F S *(circle day)*

Requested by: _____ **Telephone #** _____

E-mail: _____

Organization represented: _____ Group # _____

Number of people expected to be in attendance: _____
(Individuals/Families will be charged at the Group 3 & 4 rate)

Please Check Equipment Needed:

Bleachers _____
Volleyball Net _____
Basketball Hoops _____
Chairs _____ # ____
Tables _____ # _____
Podium _____

Locker Room: Boys _____ Girls _____
Wrestling Mat/s _____ # _____
Score Clock & Score Board Table _____
P.A. System/Microphone _____
Ticket Taker Desk /Chairs _____

Custodial Fee _____
Food Service Fee _____
Technician _____
Projection Screen _____
Risers _____

Other _____
(Please Explain)

Proof of Insurance on File: Yes or No

Fee Amount* $_____ **Paid** _____

(*In certain situations a fee will be assessed for the use of a facility. See copy of the **Facility Fee Schedule**).

APPROVED DENIED _____ *(Authorized Signature)* _____ *(Date)*

Any other specific instructions to carry out activity (*attach diagram/outline of setup, if necessary****):***

(White) *Central Office* ***(Canary)*** *Maintenance/Transportation Supervisor* ***(Pink)*** *Facility Used* ***(Gold)*** *Requesting Party*