PARKVIEW HIGH SCHOOL FACILITY USE AND ACTIVITY CALENDAR FORM

(RETURN THIS FORM TO THE COMMUNITY SCHOOL DIRECTOR)

Name of Activity		
Date(s) of Usage		Day(s) of Week
Event Times: Start	(am/pm) End	(am/pm)
Use Times: Start	(am/pm) End	(am/pm) (Includes set-up and clean-up)
Number of Attendees	Facility(s) to be ι	used
Organization using the F	acility	
Food distribution involve	ed? (usual	ly requires custodial services)
Custodial assistance requ	uired? Descri	ibe
		possible:
(If the facility is to be change last minute changes. Request	d in any way, we must be advis	ed beforehand. We will not be able to accommodate in writing, preferably at least 10 school days prior to
date of use. Otherwise, we re	gretfully will not be able to acc	
		e or equipment that I use as well as any ne Parkview High School facility.
		·
E mail addresse		Title:
E-man address:		Phone #:
Signature		Date of Request
		- ****************
must be made with the comm is a minimum charge of \$14 Sunday, and school holiday.	unity school director to have a of assessed to any organizations. To pay for custodial service Community School Director.	rsday. For the security of the facilities, arrangements custodian open, clean, and secure the building(s). There in, even PHS groups, for this service on Saturday, es, make the check payable to Parkview High School. Outside groups renting space on Fridays must also pay
Additional Equipment A	vailable	Cost to rent (non-school functions)
Cafeteria Sound System		\$10 per day
Cafeteria LCD Project		\$10 per day
Classroom LCD Projec		\$10 per day
Theater Sound System	•	\$10 per day
Theater Stage Lighting	•	\$5 per hour
Theater LCD Projection	n System	\$10 per day
This equipment must be	requested on this form in	advance of the reservation.
-	y use by non-school group	<u>s</u> :
` '	nflict with school functions.	
	ctions must have a signed contra	act and appropriate insurance. ******************
Approved		Date:
Approved with modifica	tions	
Not approved		Custodian
Comments:		