

APPLICATION AND AGREEMENT FOR
USE OF SEVASTOPOL PUBLIC SCHOOL FACILITIES

Please submit (a minimum one week notice) to the District Office (4550 Highway 57, Sturgeon Bay, WI 54235)

DATE OF APPLICATION: October 21st 2020
APPLICANT'S NAME: Lindsay de Young
SPONSORING ORGANIZATION: Middle School Cross Country
ACTIVITIES PLANNED (Be Specific and Detailed):

End of season awards event

DATE(S) REQUESTED: October 29th 2020
(The earliest events will be considered for scheduling is three months prior to the requested date)

FACILITY (IES) REQUESTED: Multi-purpose Room

STARTING TIME TO SETUP: 2:15pm EVENT BEGINS AT: 2:30pm

TIME EVENT ENDS: 3:15pm TIME CLEANUP IS FINISHED AND DOORS LOCKED: 3:30pm

TOTAL HOURS: 1.25 FEE:\$ _____

ESTIMATED ATTENDANCE: 20

DO YOU NEED AN ADMINISTRATOR PRESENT FOR THE EVENT? IF SO, IS ONE AVAILABLE?

LIST EQUIPMENT NEEDED:	Yes	No	DISTRICT WILL PROVIDE:	Yes	No
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

IF FURTHER SET UP IS NEEDED PLEASE EMAIL ROCH LAUTENBACH THE DETAILS
(rlautenbach@sevastopol.k12.wi.us)

In signing this application, the applicant agrees to be bound by the terms and conditions attached hereto which are made a part hereof.

NOTE: Please note that if a school-sponsored activity needs to be scheduled on the date(s) you have requested facility usage, the school-sponsored activity will take precedence and your activity will need to be relocated or rescheduled. We will do our best to accommodate you if this situation arises.

IF YOUR EVENT/ACTIVITY CANCELS, PLEASE NOTIFY THE DISTRICT OFFICE. (920-743-6282 EXT 1101)

SIGNATURE OF APPLICANT: Lindsay de Young

ADDRESS _____

PHONE NUMBER(S) _____

APPLICATION: APPROVED L DENIED _____

SUPERINTENDENT'S SIGNATURE [Signature] DATE: 10/22/20

For School Use Only
Date Received in District Office 10-22-20 [Signature]

Maintenance — Total Labor Hours = _____
Food Service — Total Labor Hours = _____
Materials/Supplies Used & Cost: = _____