

APPLICATION AND AGREEMENT FOR  
USE OF SEVASTOPOL PUBLIC SCHOOL FACILITIES

Please submit to the District Office (4550 Highway 57, Sturgeon Bay, WI 54235)

DATE OF APPLICATION: Nov 19, 2018  
APPLICANT'S NAME: Melissa Madygraf  
SPONSORING ORGANIZATION: Sevastopol School

ACTIVITIES PLANNED (Be Specific and Detailed):

Parent Multisensory Night. -> Teacher will be facilitating parents on decoding + reading strategies.

DATE(S) REQUESTED: Jan 15, 2019  
(The earliest events will be considered for scheduling is three months prior to the requested date)

FACILITY (IES) REQUESTED: HIGH SCHOOL IMC

STARTING TIME TO SETUP: 5:00 TIME DOORS OPEN FOR PUBLIC: 5:15

TIME EVENT ENDS: 7:00 TIME CLEANUP IS FINISHED AND DOORS LOCKED: 7:15

TOTAL HOURS: \_\_\_\_\_ FEE: \$ \_\_\_\_\_

ESTIMATED ATTENDANCE: \_\_\_\_\_

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

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 101)**

SIGNATURE OF APPLICANT: Melissa Madygraf

ADDRESS: Sevastopol School

PHONE NUMBER(S) \_\_\_\_\_

APPLICATION: APPROVED 2 DENIED \_\_\_\_\_

SUPERINTENDENT'S SIGNATURE: [Signature] DATE: 11/20/18

For School Use Only	
Date Received in District Office	<u>11-20-18</u> <u>gc</u>
Maintenance — Total Labor Hours =	_____
Food Service — Total Labor Hours =	_____
Materials/Supplies Used & Cost: =	_____