

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: May 31 2019
APPLICANT'S NAME: Jen Wiesner
SPONSORING ORGANIZATION: HS Volleyball
ACTIVITIES PLANNED (Be Specific and Detailed): Pre season meeting

DATE(S) REQUESTED: Wed. June 5th
(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: _____ TIME DOORS OPEN FOR PUBLIC: 3:15

TIME EVENT ENDS: 4:30 TIME CLEANUP IS FINISHED AND DOORS LOCKED: _____

TOTAL HOURS: _____ FEE: \$ _____

ESTIMATED ATTENDANCE: _____

LIST EQUIPMENT NEEDED:	Yes	No	DISTRICT WILL PROVIDE:	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: Jen Wiesner

ADDRESS _____

PHONE NUMBER(S) _____

APPLICATION:

APPROVED 2

DENIED _____

SUPERINTENDENT'S SIGNATURE [Signature]

DATE: 6/4/19

Date Received in District Office 5-31-19 gc *For School Use Only* 5-31 12:55

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