

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: 6-4-19
APPLICANT'S NAME: Tanya Hasenager
SPONSORING ORGANIZATION: HS Track
ACTIVITIES PLANNED (Be Specific and Detailed):

End of Season Awards

DATE(S) REQUESTED: Friday June 7 3:30 pm
(The earliest events will be considered for scheduling is three months prior to the requested date)

FACILITY (IES) REQUESTED: Multipurpose Room

STARTING TIME TO SETUP: 3:00 TIME DOORS OPEN FOR PUBLIC: —

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

TOTAL HOURS: 1 FEE: \$ —

ESTIMATED ATTENDANCE: 30

LIST EQUIPMENT NEEDED:

DISTRICT WILL PROVIDE:

<u>Tables</u>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<u>Chairs</u>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
_____	Yes <input type="checkbox"/>	No <input type="checkbox"/>

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: Tanya Hasenager

ADDRESS: _____

PHONE NUMBER(S): _____

APPLICATION: APPROVED 2 DENIED _____

SUPERINTENDENT'S SIGNATURE: [Signature] DATE: 6/5/19

Date Received in District Office 6-4-19 gc For School Use Only

6/4 12:54

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