

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

ACTIVITIES PLANNED (Be Specific and Detailed):

Redcross/FAA Blood Drive

(The earliest events will be considered for scheduling is three months prior to the requested date)

FACILITY (IES) REQUESTED: Multi purpose Deb Dantons room after 3:30

STARTING TIME TO SETUP: 10:00 AM EVENT BEGINS AT: 11:00 AM

TIME EVENT ENDS: 5:00 pm TIME CLEANUP IS FINISHED AND DOORS LOCKED: 6:00 pm

TOTAL HOURS: 6 FEE: \$

ESTIMATED ATTENDANCE: 65

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

LIST EQUIPMENT NEEDED:

DISTRICT WILL PROVIDE:

Tables chairs coolers	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

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: John Carl

ADDRESS _____

PHONE NUMBER(S) 743-6282

APPLICATION: APPROVED *[initials]* DENIED

SUPERINTENDENT'S SIGNATURE  DATE: 2/2/20

Date Received in District Office 2-26-20 *gc* For School Use Only

Maintenance — Total Labor Hours =

Food Service — Total Labor Hours = _____

Materials/Supplies Used & Cost: = _____