

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: April 23, 2019
APPLICANT'S NAME: Sen Wiesner
SPONSORING ORGANIZATION: Action Planning - All Staff Kick off
ACTIVITIES PLANNED (Be Specific and Detailed): Strategic Planning

DATE(S) REQUESTED: May 2nd & May 9th
(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: 3:00 TIME DOORS OPEN FOR PUBLIC: 3:20

TIME EVENT ENDS: 4:30 TIME CLEANUP IS FINISHED AND DOORS LOCKED: 5:00

TOTAL HOURS: _____ FEE: \$ _____

ESTIMATED ATTENDANCE: All Staff

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: Sen Wiesner
ADDRESS: _____

PHONE NUMBER(S): _____

APPLICATION: APPROVED X DENIED _____
SUPERINTENDENT'S SIGNATURE: [Signature] DATE: 4/25/19

Date Received in District Office	<u>4-23-19</u>	<i>For School Use Only</i>	<u>4/23</u>	<u>3:40</u>
Maintenance — Total Labor Hours =	_____			
Food Service — Total Labor Hours =	_____			
Materials/Supplies Used & Cost: =	_____			