

APPLICATION AND AGREEMENT FOR  
USE OF SEVASTOPOL PUBLIC SCHOOL FACILITIES

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

DATE OF APPLICATION: 8/19/19

APPLICANT'S NAME: Tracy Wantlet

SPONSORING ORGANIZATION: PTO

ACTIVITIES PLANNED (Be Specific and Detailed):

PTO - Turkey Trot

DATE(S) REQUESTED: 11/2/19

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

FACILITY (IES) REQUESTED: Kitchen

STARTING TIME TO SETUP: 6:00 Am TIME DOORS OPEN FOR PUBLIC: \_\_\_\_\_

TIME EVENT ENDS: 11:00 pm TIME CLEANUP IS FINISHED AND DOORS LOCKED: 1:00 pm

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

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

LIST EQUIPMENT NEEDED:

DISTRICT WILL PROVIDE:

_____	Yes _____	No _____
_____	Yes _____	No _____
_____	Yes _____	No _____

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: Tracy Wantlet

ADDRESS \_\_\_\_\_

PHONE NUMBER(S) 920-495-2982

APPLICATION: APPROVED X DENIED \_\_\_\_\_

SUPERINTENDENT'S SIGNATURE [Signature] DATE: 8/26/19

Date Received in District Office 8/22/19 gc For School Use Only

Maintenance — Total Labor Hours = \_\_\_\_\_

Food Service — Total Labor Hours = \_\_\_\_\_

Materials/Supplies Used & Cost: = \_\_\_\_\_

8/22  
3:32