

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: 9/5/19
APPLICANT'S NAME: Amy Lautbach
SPONSORING ORGANIZATION: _____
ACTIVITIES PLANNED (Be Specific and Detailed):

School Pictures

DATE(S) REQUESTED: 9/20/19
(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: 7:00am TIME DOORS OPEN FOR PUBLIC: 8

TIME EVENT ENDS: 12:00pm TIME CLEANUP IS FINISHED AND DOORS LOCKED: _____

TOTAL HOURS: 5 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: Amy Lautbach

ADDRESS: 4550 Hwy 57

PHONE NUMBER(S): 743-6282 x1105

APPLICATION: APPROVED 2 DENIED _____

SUPERINTENDENT'S SIGNATURE: [Signature] DATE: 9/6/19

| | | |
|------------------------------------|---------------|---------------------|
| Date Received in District Office | <u>9-6-19</u> | For School Use Only |
| Maintenance — Total Labor Hours = | _____ | |
| Food Service — Total Labor Hours = | _____ | |
| Materials/Supplies Used & Cost: = | _____ | |

9/6
1:20