

**SEND ALL COPIES TO FACILITY SERVICES FOR PROCESSING**

White ..... Applicant's Copy  
Canary ..... Custodial Service Copy  
Pink ..... Facility Service Copy  
Gold ..... Principal's Copy

**Chesterfield County Public Schools  
Application Form—Use/Rental of Facilities**

June 1995—Previous Editions Obsolete

Name of School \_\_\_\_\_ Date \_\_\_\_\_

Specific date(s) to be used \_\_\_\_\_

Auditorium/Forum—Hours of use \_\_\_\_\_

Gymnasium—Hours of use \_\_\_\_\_

Cafeteria—Hours of use \_\_\_\_\_

Classroom—Room Number(s) \_\_\_\_\_ Hours of use \_\_\_\_\_

Other \_\_\_\_\_ Hours of use \_\_\_\_\_

Name of Organization \_\_\_\_\_

Address of Organization \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Is this organization an IRS recognized not-for-profit organization?  Yes  No

Applicant's Name \_\_\_\_\_ Telephone No. \_\_\_\_\_

Applicant's Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Citizen of Chesterfield?  Yes  No Admission Charges?  Yes  No Amount? \_\_\_\_\_

Nature of Activities \_\_\_\_\_ Parks & Recreation Sponsored?  Yes  No

Special Equipment:  Piano  Lighting  P.A. System

Kitchen\* Have you contracted with Food Services?  Yes  No

I have read and thoroughly understand all the rules and regulations of School Board Policy #617.1 which govern use of facilities and agree to have my organization enforce all rules which are applicable to this use (See Reverse):

Fee Attached  Fee to be paid within 10 days of event. \_\_\_\_\_  
Signature of Applicant

**THIS RENTAL IS NOT APPROVED UNTIL APPLICANT RECEIVES APPROVED COPY SIGNED BY FACILITY SERVICES**

**SCHOOL ACTION**

The above facilities are available for use on the date(s) and time specified except as noted.

Yes  No \_\_\_\_\_ Date \_\_\_\_\_  
Principal's Signature

The Custodial Staffing Requested:

Lead Custodian I—will work  
 Night Crew  Please assign \_\_\_\_\_  
Name

Custodial staff provides only those services shown in "Custodial Services" paragraph on the reverse.

**FACILITY SERVICES ACTION**

Approved  Disapproved \_\_\_\_\_ Date \_\_\_\_\_  
Facility Services Signature

Special Provisions \_\_\_\_\_ Facility Charge \$ \_\_\_\_\_

Custodial Cost \$ \_\_\_\_\_

\*Food Services and Miscellaneous Special Services charges are to be paid directly to the Department of Food Services and the school as appropriate.

**TOTAL AMOUNT DUE \$ \_\_\_\_\_**